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JUL 28 2000

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 517.765)

WELL I.D. # 139371
START CARD # 127909

Instructions for completing this report are on the last page of the WATER RESOURCES DEPT. SALEM, OREGON

(1) OWNER: Well Number _____
Name Mary Ann Munkers
Address to 3608 Clark Community Rd.
City Levyton State Or. Zip 97949

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 292 ft.
Explosives used Yes No Type _____ Amount _____

HOLE SEAL

Diameter	From	To	Material	From	To	Seal type
12"	0	20	Per Form	20	0	7
10"	20	75	"	"	78	20
6"	78	292	"	"	20	10

How was seal placed: Method A B C D F
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING LINER:

Casing	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
9"	9"	+2	75	3/8"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Final location of sheet(s) 75'

(7) PERFORATIONS/Screens:

From	To	Size	Type	Material	Tube size	Casing	Liner

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gallons _____ Drawdowns _____ Drill stem at _____ Time _____
150' + _____ 252' _____
150' _____ 240' _____
125' _____ 200' _____
Temperature of water 60°F Depth Artesian Flow Found _____
Was a water analysis done? Yes No
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata _____

(9) LOCATION OF WELL by legal description:
County Morrow Latitude _____ Longitude _____
Township 1 N of 3 Range 25 E of W.W.M.
Section 33 NE 1/4 SW 1/4
Tax Lot 5200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 6308 CLARK CAMYAN RD

(10) STATIC WATER LEVEL:
15' ft. below land surface. Date 7-20-00
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 15'

From	To	Estimated Flow Rate	SWL
15	20	2	
150	155	20	
200	240	30	
270	292	150+	13'

(12) WELL LOG:
Grouted Elevation _____

Material	From	To	SWL
Soil	0	3	
Broken Basalt + gravel	3	10	
Black Basalt	10	15	
Broken Basalt w/ yellow clay	15	20	
gray Basalt	20	20	
gray Basalt w/ Blue Clay	20	105	
gray Basalt	105	150	
gray Basalt w/ Blue Clay	150	155	
gray Basalt	155	200	
gray + Brown Basalt w/ Blue + yellow clay	200	230	
gray + Brown Basalt	230	270	
gray + Brown Basalt	270	292	13'

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AUG 16 2001
WATER RESOURCES DEPT
SALEM, OREGON

Date started 7-19-00 Completed 7-20-00
(bonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Signed James H McCurdy WWC Number 17000
Date 7-20-00
(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Ray Bond WWC Number 544
Date 7-20-00