

NOTICE TO WATER WELL CONTRACTOR:
The original and first copy of this report are to be filed with the **STATE ENGINEER, SALEM, OREGON** within 30 days from the date of well completion.

RECEIVED
MAR 6 1969
STATE ENGINEER
SALEM, OREGON

WATER WELL REPORT

MORR 69

STATE OF OREGON (Please type or print) State Well No. 1/26-9dc
Do not write above this line State Permit No. _____

(1) OWNER:

Name Genl Cuttsforth
Address Rt. 1 Lexington

(11) LOCATION OF WELL:

County MORROW Driller's well number _____
SW 1/4 SE 1/4 Section 9 T. 15 R. 26 E W.M.
Bearing and distance from section or subdivision corner
1300 East South and 70° west of
the corner between Sec-09 and 10

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(12) WELL LOG:

Diameter of well below casing 10" to 12"
Depth drilled 458 ft. Depth of completed well 458 ft.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level as drilling proceeds. Note drilling rates.

CASING INSTALLED:

Threaded Welded
10" Diam. from 0 ft. to 22 ft. Gage, 250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

MATERIAL	From	To	SWL
Top Soil DARK	0	3	
BASALT Black Loose	3	10	
" " HARD	10	31	
" " BROKEN	31	80	
" grey HARD	80	101	
CLAY BROWN	101	108	
BASALT BROWN (WATER BEARING)	108	111	
" BROWN BLACK grey	111	207	
" BROWN Black broken WATER BEARING	207	458	

PERFORATIONS:

Perforated? Yes No
Type of perforator used _____
Size of perforations in. by in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name _____ Model No. _____
Type _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WATER LEVEL: Completed well.

Static level 110 ft. below land surface Date 9/17/68
Artesian pressure lbs. per square inch Date _____

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
ON AIR LIFT 60 gpm " 4 "
" " " " " "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m. Date _____
Temperature of water 57 Was a chemical analysis made? Yes No

(10) CONSTRUCTION:

Well seal—Material used Cement AND Bentonite
Depth of seal 0 - 22' ft.
Diameter of well bore to bottom of seal 15 in.
Were any loose strata cemented off? Yes No Depth _____
Was a drive shoe used? Yes No
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Bell Rice Date 2/21, 1969
(Drilling Machine Operator)

Drilling Machine Operator's License No. 446

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME OTTE ELLSWORTH (Type or print)
(Person, firm or corporation)

Address P.O. Box 471 Island Ct. Oregon

[Signed] Otte Ellsworth
(Water Well Contractor)

Contractor's License No. 398 Date 2/21/69, 1969