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STATE OF OREGON  
WATER WELL REPORT  
(as required by ORS 537.765)  
WATER RESOURCES DEPT

75/4w/35  
47971

(START CARD) #

SALEM, OREGON

(1) OWNER:  
Name Dave Setniker  
Address PO Box 338  
City Independence State OR Zip 97351

(2) TYPE OF WORK:  
 New Well  Deepen  Recondition  Abandon

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

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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 43 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
<u>16</u>	<u>0</u>	<u>18.5</u>	<u>Cement</u>	<u>0</u>	<u>18.5</u>	<u>10 bentonite</u>
<u>12</u>	<u>18.5</u>	<u>43</u>				

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>12</u>	<u>11.5</u>	<u>43</u>	<u>.250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 43 ft.

(7) PERFORATIONS/SCREENS:  
 Perforations Method Mills knife  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>25</u>	<u>38</u>	<u>3/8 x 2 1/2</u>	<u>260</u>			<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 90 Drawdown 1 ft. Drill stem at \_\_\_\_\_ Time 1 hr.

Temperature of Water 56 Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  Yes By whom \_\_\_\_\_  
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 Polk Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 7-5 N or S. Range 4-W E or W. WM. \_\_\_\_\_  
Section 35 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 1530 Independence Hwy

(10) STATIC WATER LEVEL:  
10 ft. below land surface. Date 8-16-93  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 25

From	To	Estimated Flow Rate	SWL
<u>25</u>	<u>38</u>	<u>750 +</u>	<u>10</u>

(12) WELL LOG:  
Ground elevation \_\_\_\_\_

Material	From	To	SWL
<u>Soil</u>	<u>0</u>	<u>2</u>	
<u>Brown Sandy clay</u>	<u>2</u>	<u>16</u>	
<u>Blue Sandy clay</u>	<u>16</u>	<u>19</u>	
<u>Brown clay + Gravel</u>	<u>19</u>	<u>25</u>	
<u>Sand + Gravel</u>	<u>25</u>	<u>38</u>	<u>10</u>
<u>Gray Clay</u>	<u>38</u>	<u>43</u>	

Date started 8-10-93 Completed 8-16-93  
(unbonded) 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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.  
Signed WMC Smith WWC Number 175 Date 8-16-93

(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 well construction standards. This report is true to the best of my knowledge and belief.  
Signed Floyd R. Suppe WWC Number 1273 Date 8-18-93