

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

TILL  
1254

RECEIVED

AUG 23 1994

45/10w/18ba  
69469

(START CARD) #

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT.

(1) OWNER:

Name WILLIAM MYERS Well Number \_\_\_\_\_  
Address 312 STILLWELL AVE  
City TILLAMOOK State OR Zip 97141

(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 224 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
	0	224	Cement	0	30	10 sks.
			Drill gel	30	125	
			Hole plug	125	135	8 sks.
			Cement	135	160	8 sks.

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

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from 160 ft. to 224 ft. Size of gravel 1C SAND

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	8"	+3	191	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	8"	221	224	250	<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) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_  
 Screens Type WOUNDWIRE Material SS STEEL

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
191	221	.020		8"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing Time
60	10		2 hrs.
100	17		18 hrs.

Temperature of water 52° F Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  Yes By whom AMJ  
Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County TILLAMOOK Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 4S N or S Range 10W E or W. WM. \_\_\_\_\_  
Section 18 NE 1/4 NW 1/4  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

PACIFIC CITY, OR N/A

(10) STATIC WATER LEVEL:

140 ft. below land surface. Date 08/18/94  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 191

From	To	Estimated Flow Rate	SWL
191	221	100 gpm	140

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Fine brown sand	0	152	
Fine gray sand	152	221	140
Soft dark brown clay	221	225	
Soft lt. gray sandy clay	225	237	
WELL COMPLETED @ 224 FT.			

Date started 07/19/94 Completed 08/18/94

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

(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.

WWC Number 1266  
Signed \_\_\_\_\_ Date 08/19/94