

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

Till 019

10/10/13 9b

(START CARD) # 24943

(1) OWNER: Well Number: _____
 Name Watseco/Barview Water Dist.
 Address P.O. Box 295
 City Rockaway, Tillamook State OR Zip 97136

(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 73 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds 11sks+gel
Diameter	From	To	Material Cement	From	To	
6	73	80		0	25	

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from 73 ft. to 80 ft. Material Fill
 Gravel placed from 25 ft. to 73 ft. Size of gravel 2/12

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
					<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	8	+1	60	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		70	73	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Final location of shoets) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method Johnson Screen
 Screens Type Pipe size Material Stainless S

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60	70	.030		8"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing
 Artesian

Yield gal/min	Drawdown	Drill stem at	Time
75	11 1/2		1 hr.
40	7		"
150		40	"

Temperature of water 52° F 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 Tillamook Latitude _____ Longitude _____
 Township 1N N or S. Range 10W E or W, WM.
 Section 18 NW SE
 Tax Lot #1 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Barview County Park

(10) STATIC WATER LEVEL:
8 ft. below land surface. Date 10/05/90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 60

From	To	Estimated Flow Rate	SWL
60	70	150+ gpm	8

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Brown beach sand, occ. wood	0	50	
Gray beach sand, fine	50	59	
Black sand & Small pea gravel	59	70	8
Black sand, sm. pea gravel, cemented	70	73	
Brown sandy clay	73	77	
Blue conglomerate/cemented gravel	77	80	

RECEIVED
 OCT 10 1990
 WATER RESOURCES DEPT.
 SALEM, OREGON

Date started 10/01/90 Completed 10/05/90

(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.
 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 well construction standards. This report is true to the best of my knowledge and belief.
 WWC Number 573
 Signed [Signature] Date 10/08/90