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50076

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

89998 (START CARD) #

Instructions for completing this report are grather for	OGONorm.					
(1) OWNER: Well Number _	(9) LOCATION OF V	WELL by legal descri	ption:			
Name CITY OF WHEELER	County TILLAMO	OK Latitude	Lon	gitude		
Address P.O. BOX 177	Township 2N	N or S Range	9W	E or V	V. WM.	
City WHEELER State OR	Section 5	<u>NE</u> 1/4_	NW	1/4		
(2) TYPE OF WORK	Tax Lot 200 Lot Block Subdivision					
New Well Deepening Alteration (repair/recondition)	Street Address of Well	(or nearest address)				
(3) DRILL METHOD:	22095 FOSS R	D., WHEELER, (OR			
Rotary Air Rotary Mud XX Cable Auger	(10) STATIC WATER LEVEL:					
Other	14 ft. below land surface. Date 7-24-96					
(4) PROPOSED USE:	Artesian pressure 0 lb. per square inch. Date					
Domestic Community Industrial Irrigati	(11) WATER BEARI	NG ZONES:				
Thermal Injection Livestock (5) BORE HOLE CONSTRUCTION:	MUNICIPAL					
	J.W.11	Depth at which water was	first found 9'			
Special Construction approval Yes XXNo Depth of Complete Explosives used Yes XXNo Type Amount	From	То	E-si	rı n.	T 01111	
HOLE SEAL		9	16	15	Flow Rate	SWL
• • • • • • • • • • • • • • • • • • • •	cks or pounds	16	23	<u></u>		14
18 0 8	or pourious	42.5	50	500		14
16 8 63		744.7				14
NEAT CEMENT33.5 0 59	O CACVC					
	onuno	(12) WELL LOG:				
How was seal placed: Method A B XXC D E Ground Elevation						
Other					·····	******
Backfill placed from 33.5 ft. to 35 ft. Material SA	AND & BENT	. CHIPS Materia		From	To	SWL
Gravel placed from 35 ft. to 55 ft. Size of grave	el <u>PEA ROC</u> K	SAND GREY LOO	SE (overbank d	lep) O	2	
(6) CASING/LINER: 55 63	DRAIN RO	CKSAND GREY SIL	TY.	2	9	
Diameter From To Gauge Steel Plastic Wel	lded Threaded	SAND & GRAVEL	MED SILTY	9	11	
	_XX □	SAND & GARVEL	COURSE SILTY	11	16	
	XX	SAND GRAVEL C	OBBLES 10"MTNI	IS 16		
		BRN LOOSE (s	-		23	
		COBBLES SAND		23		
Liner:			BRN SOME SILT	BRN	27	
Ti li di ci ci NONE	SILT BROWN GR		27	28		
Final location of shoe(s) NONE		SILTY BRN 5"	28			
(7) PERFORATIONS/SCREENS: Perforations Method	MINUS SOME C			31		
Perforations Method Type JOHNSON V-WIRMaterial	GRAVEL BRN CO		31			
Slot Tele/pipe	SOME SAND SE		20 5	32.5		
	Casing Liner	SAND GRAVEL C		32.5	2/ 5	
43 35 100 12 1/8		GRAVEL & COBB		34.5	34.5	
		BROWN LESS S		34.3	39	
		SAND GRAVEL C		39		***************************************
			AND SEMI TIGHT		42.5	
		TIEROD TIONED D	MIND STREET LEGIST		44.5	
(8) WELL TESTS: Minimum testing time is 1 hour		Date started 6-21-96	Complete	ed 7-2	4-96	
Flowing		(unbonded) Water Well C			T 20	
XXPump ☐ Bailer ☐ Air ☐ Artesian Yield gal/min ☐ Drawdown ☐ Drill stem at Time		I certify that the work I	performed on the constru	ction, altera	tion, or aban	donment
		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.				
1012 3.5 24		1/1/1/0		WWC Num	ber 148	37
		Signed Date 7-29-96				
Temperature of water 49 Depth Artesian Flow Found (bonded) Water West Consider Certification:						
Was a water analysis done? XX Yes By whom AGT TECH	I accept responsibility for	or the construction, altera	tion, or abar	donment wo	ork	
Did any strata contain water not suitable for intended use?	performed on this well during performed during this time	ng the construction dates is in compliance with Or	reported ab	ove. All wo supply well	rk	
Salty Muddy Odor Colored Other	construction standards. The	is report is true to the bes	t of my know	wledge and b	oclief.	
Depth of strata:	The state of	n St. 11.	WWC Num	ber <u>688</u>		



STATE OF OREGON AUG 2 0 1996 VELL I.D. # L01906
(as required by ORS 537.765) WATER RESOURCES DEPT.

(START CARD) #___89998 Instructions for completing this report a RAH HIGHARD RECOMMS form. (1) OWNER: (9) LOCATION OF WELL by legal description: Well Number Name CITY OF WHEELER County TILLAMOOK Latitude Longitude N or S Range <u>OW</u> Address P.O. BOX 177 Township 2N E or W. WM. Section 5 WHEELER State Zip 071/17 1/4 (2) TYPE OF WORK Tax Lot Block Lot Subdivision New Well Deepening Alteration (repair/recondition) Abandonment Street Address of Well (or nearest address) (3) DRILL METHOD: 22095 FOSS RD. WHEELER OR (10) STATIC WATER LEVEL: Rotary Air Rotary Mud TX Cable Other ft. below land surface. Date (4) PROPOSED USE: Artesian pressure lb. per square inch. Date Domestic Community (11) WATER BEARING ZONES: Industrial Irrigation XX Other MUNICIPAL Thermal Injection Livestock (5) BORE HOLE CONSTRUCTION: Depth at which water was first found Special Construction approval Yes No Depth of Completed Well Explosives used Yes No Type From SWL Estimated Flow Rate HOLE **SEAL** Diameter From Material From Sacks or pounds (12) WELL LOG: How was seal placed: Method \Box B \Box C $\square D$ \Box E Ground Elevation _ Other -Backfill placed from ft. to SWL Material Material From То Gravel placed from ft. GRAVEL GREY 6" MINUS CLEAN ft. to Size of gravel 42.5 (6) CASING/LINER: SOME SAND 50 GRAVEL 8" MINUS BRN SANDY Diameter Gauge Steel Welded Threaded 50 PACKED Casing: 54 SILT BROWN GRAVELY 54 55 GRAVEL BRN SILTY 6" MINUS 55 59.5 П BED ROCK BLUE GREY SOFT 50.5 Liner: \Box BROKEN WEATHERED 63 Final location of shoe(s) (7) PERFORATIONS/SCREENS: Perforations Method Screens Material Slot Tele/pipe From Number , Diameter Casing Liner (8) WELLTESTS: Minimum testing time is 1 hour Completed 7-24-96 (unbonded) Water Well Constructor Certification: Flowing Artesian Pump Bailer Air 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 Drill stem at Yield gal/min Drawdown Time 1 hr. and belief. Date 7-29-96 Depth Artesian Flow Found Temperature of water Yes By whom Was a water analysis done? I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work Did any strata contain water not suitable for intended use? performed during this time is in compliance with Oregon water supply well Salty Muddy Odor Colored Other construction standards. This report is true to the best of my knowledge and belief. Depth of strata: WWC Number <u>688</u> Signed Date 7-29-96