

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

**RECEIVED**  
MAY 21 1964  
STATE ENGINEER

WATER WELL REPORT

STATE OF OREGON  
(Please type or print)

UMAT  
3620

5/28-35

State Well No. \_\_\_\_\_

State Permit No. \_\_\_\_\_

(1) OWNER:

Name E. G. Tilden  
Address R 2 Box 130  
Hamiston Oregon

(2) LOCATION OF WELL:

County Washtenaw Driller's well number 3  
W. 1/2 of 1/4 S. E. Quarter 35 T. 5N R. 28 W.M.  
Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check):

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

(4) PROPOSED USE (check):

Domestic  Industrial  Municipal   
Irrigation  Test Well  Other

(5) TYPE OF WELL:

Rotary  Driven   
Cable  Jetted   
Dug  Bored

(6) CASING INSTALLED:

Threaded  Welded

8" Diam. from 0 ft. to 172 ft. Gage 250  
" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_  
" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_

(7) 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.

(8) SCREENS:

Well screen installed?  Yes  No

Manufacturer's Name \_\_\_\_\_  
Type \_\_\_\_\_ Model No. \_\_\_\_\_  
Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Diam. Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

(9) CONSTRUCTION:

Well seal—Material used in seal Cement  
Depth of seal 20 ft. Was a packer used? NO  
Diameter of well bore to bottom of seal 12 in.  
Were any loose strata cemented off?  Yes  No Depth \_\_\_\_\_  
Was a drive shoe used?  Yes  No  
Was well gravel packed?  Yes  No Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Did any strata contain unusable water?  Yes  No  
Type of water? \_\_\_\_\_ depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_

(10) WATER LEVELS:

Static level 85 ft. below land surface Date 5-19-64  
Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made?  Yes  No If yes, by whom?  
Yield: 30 gal./min. with 25 ft. drawdown after over night hrs.  
" " " " " "  
" " " " " "  
Bailer test 30 gal./min. with 20 ft. drawdown after over night hrs.  
Artesian flow \_\_\_\_\_ g.p.m. Date \_\_\_\_\_  
Temperature of water \_\_\_\_\_ Was a chemical analysis made?  Yes  No

(12) WELL LOG:

Diameter of well below casing 8 inch

Depth drilled 207 ft. Depth of completed well 207 ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Sandy soil	0	4
Sand	4	108
Gravel	108	124
Sand	124	152
Shale	152	162
Red rock black	162	170
Rock black	170	180
Rock blue	180	200
Rock black	200	207

water bearing from  
200 to 205

Total depth 207

Work started 5-5 1964 Completed 5-19 1964  
Date well drilling machine moved off of well 5-20 1964

(13) PUMP:

Manufacturer's Name \_\_\_\_\_  
Type: \_\_\_\_\_ H.P. \_\_\_\_\_

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 Allison Drilling Co.  
(Person, firm or corporation) (Type or print)  
Address McNARY Oregon Box 97  
Drilling Machine Operator's License No. 300  
[Signed] A. G. Allison  
(Water Well Contractor)  
Contractor's License No. 419 Date 5-20, 1964