

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

WASH 10854

010854

JUN 22 1988

WASH NO 3674
 15/3W-22ab

(1) OWNER: Well Number: _____
 Name Geary Ruyak
 Address Rt 2 Box 256
 City Cornelius State OR Zip 97113

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

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10	0	35	Cement	0	35	35
6	35	335				

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: 6	70	243	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 _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input 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

150		335	1 hr.
150		235	

Temperature of water 54 Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County Washington Latitude _____ Longitude _____
 Township 13 N or S, Range 3W E or W, WM.
 Section 22 NW ^{0/4} NE _{1/4}
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
33 ft. below land surface. Date 6-9-88
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 265

From	To	Estimated Flow Rate	SWL
265	320	150	

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Top Soil	0	1	
BROWN CLAY	1	40	
Red CLAY HARD	40	100	
BROWN CLAY HARD	100	260	
GRAVEL & CLAY HARD	260	320	
BASALT	320	335	

Well Test
 7.3 GPM FROM 75'
 130 " " 120
 145 " " 133
 150 " " 230
 150 " " 335

Date started 5-28-88 Completed 6-9-88

(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 Cyril Vandenberg WWC Number _____ 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.
 Signed Cyril Vandenberg WWC Number _____ Date 6-19-88

RECEIVED
JUN 7 1988

WATER RESOURCES DEPT.
SALEM, OREGON

"START CARD"
NOTICE OF BEGINNING OF WELL CONSTRUCTION
(as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and Mailing Address Gary Angel

Proposed Commencement Date 5-28-88

Proposed Well Depth 200, Diameter 6"

and Use:

- Domestic
- Thermal
- Community
- Injection
- Industrial
- Other
- Irrigation

Proposed Well Location: County Washington

Township 1S (N or S) Range 3W (E or W) Section 22

At least 2 of these must be provided

1. NW 1/4 of NE 1/4 of above section
2. street address of well location Rt 2 Box 256 Cornelius Ore
3. tax lot number of well location _____
4. attach approved map with location identified.
(see reverse of this form for approved maps)

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

x Gary Angel
Owner's Signature

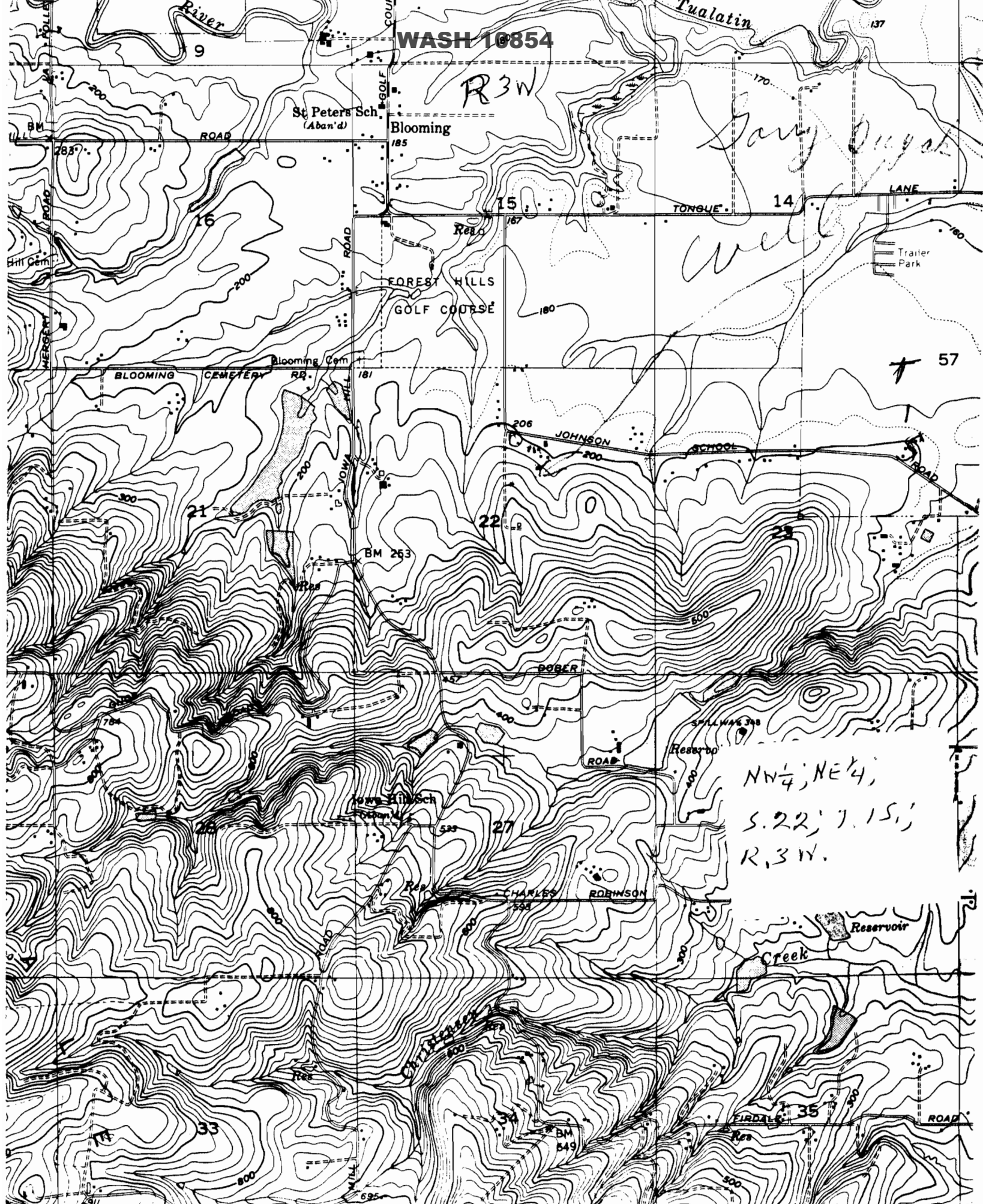
x Cyril Vandenberg
Bonded Water Well Constructor

Owner
Title
5-26-88
Date

License No. 353
Company Cyril Vandenberg

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.

RECEIVED MAY 31 1988



T. 15., R. 3W;

7 1/2' Laurelwood Quad,
 20' Contour Interval; 1" = 3000'