

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

SEP 4 1992

(START CARD) # 46989

(1) OWNER:

Well Number _____
Name TEUFEL PRODUCTS
Address 13131 NW LAIDLAW RD
City PORTLAND State OR Zip 97229

(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	
12	0	46	Cement	0	46	20 sks.
8	46	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:	8	+1	46	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	6	-3	335	PVC160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☒ Perforations Method DRILLED
☐ Screens Type _____ Material PVC160

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
275	315		160	1/2"		<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<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
60		325	1 hr.
45		250	2 hr.

Temperature of Water 55° 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: _____

(9) LOCATION OF WELL by legal description:

County WASHINGTON Latitude _____ Longitude _____
Township 1N N or S. Range 1W E or W. WM. _____
Section 21 NE 1/4 NW 1/4
Tax Lot 503 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 13131 NW LAIDLAW RD
PORTLAND, OR

(10) STATIC WATER LEVEL:

164 ft. below land surface. Date 08/31/92

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 270

From	To	Estimated Flow Rate	SWL
270	300	60 gpm	164

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Clay w/decomp basalt	0	8	
Firm gray-brown basalt	8	104	
Hard gray basalt	104	119	
Firm gray-brown basalt	119	131	
Soft brown basalt	131	136	
Soft lt. gray-brown clay	136	143	
Firm gray-brown basalt	143	152	
Firm gray-black basalt	152	162	
Firm gray-brown basalt	162	193	
Hard gray basalt	193	212	
Soft red-brown basalt	212	220	
Firm gray-brown basalt	220	226	
Firm gray-black basalt	226	236	
Hard gray basalt	236	255	
Visicular gray-black basalt	255	259	
Visicular red basalt	259	265	
Broken gray-brown basalt	265	305	
Hard gray basalt	305	335	

Date started 08/27/92 Completed 08/31/92

(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 _____ 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 [Signature] WWC Number 1266
Date 08/31/92