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1S/1W/24aa
38693 pg. 1

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

WASA
3197

AUG 19 1993

(START CARD) # 38693

(1) OWNER: Arranmore Homeowners Association
Well Number: SALEM, OREGON
Name: Arranmore Homeowners Association
Address: 7386 S.W. Arranmore Way
City: Portland State: OR Zip: 97223

(9) LOCATION OF WELL by legal description:
County: Washington Latitude: Longitude:
Township: 15 N or S. Range: 1W E or W, WM.
Section: 24 NE 1/4 NE 1/4
Tax Lot: Lot: Block: Subdivision:
Street Address of Well (or nearest address): Next to 6915 S.W. Arranmore Way, Portland

(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 594 ft.
Explosives used Yes No Type Amount

HOLE SEAL Amount
Diameter From To Material From To sacks or pounds
12" 0' 51' CEMENT 0' 51' 42 SACKS
8" 51' 594' CEMENT 392' 440.5' 7 SACKS
6" 392' 440.5' CEMENT 392' 440.5' 7 SACKS
8" 440.5' 594'

How was seal placed: Method A B C D E
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:
Casing: Diameter 8" From 41.5' To 417' Gauge 2.50"
Liner: Diameter 6" From 392' To 440.5' Gauge 2.50"
Steel Plastic Welded Threaded

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____

From To Slot size Number Diameter Tele/pipe size Casing Liner
JUL 7 1993
WATER RESOURCES DEPT
SALEM, OREGON

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem at Time
50 35' 1 hr.
200 106' 1 HR.
230 151' 6 HRS.
Temperature of water 54.0 Depth Artesian Flow Found

Was a water analysis done? Yes By whom WATER LAB
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other
Depth of strata:

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

(11) WATER BEARING ZONES:
Depth at which water was first found 66'
From To Estimated Flow Rate SWL
66' 70' 1-2 GPM 21'
262' 274' 15 GPM 52'
500' 589' 200+ GPM 87'

(12) WELL LOG:
Ground elevation _____
Material From To SWL
BROWN CLAY w/ SOME SILT 0' 17'
BROWN CLAY 17' 22'
BROWN CLAY -SOFT 22' 37'
REDDISH-BROWN CLAY 37' 51'
BROWN + BLUE CLAY 51' 60'
RED-BROWN CLAY -HEAVY 60' 66'
BROWN-BLUE CLAY 66' 87' 21'
GRAY CLAY 87' 94'
BROWN-BLUE/GRAY CLAY 94' 117'
RED-BROWN w/ BLUE CLAY 117' 153'
RED-BROWN CLAY -DENSE 153' 160'
RED-BROWN w/ BLUE CLAY 160' 203'
BROWN CLAY 203' 216'
BROWN w/ BLUE CLAY 216' 229'
DARK BROWN SANDY CLAY w/ OCCASIONAL DEBBLES -3/8" 229' 262'
RED-BROWN CLAY w/ ROCK BITS 262' 274' 52'
DARK BROWN STICKY CLAY 274' 292'
BROWN SOFT CLAY 292' 299'
RED-BROWN DENSE CLAY 299' 319'
RED CLAY -SOFT 319' 367'
RED-BROWN CL. w/ STREAKS OF COAL-LIKE MATERIAL + GREEN
Date started FEBRUARY 16, 1993 Completed APRIL 10, '93

(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 Michael Waldrop WWC Number 633 Date APRIL 25, '93

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

WASH
3197

WATER RESOURCES DEPT.

(START CARD) #

(1) OWNER: Name ARRAN MORE HOMEOWNERS ASSOCIATION
Address _____
City _____ State _____ Zip _____

Well Number: _____

SALEM, OREGON LOCATION OF WELL by legal description:

County _____ Latitude _____ Longitude _____
Township _____ N or S. Range _____ E or W, WM.
Section _____ 1/4 _____ 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

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

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	

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:

Casing/Liner	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
					<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"/>

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"/>
					JUI	<input type="checkbox"/>	<input type="checkbox"/>
					WATER RES	<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
			1 hr.

Temperature of water _____ 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: _____

(10) STATIC WATER LEVEL:

_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Material	From	To	SWL
CONT'D			
CLAY STONE OR SOAPSTONE - FORMATION UNSTABLE	369'	399'	
HARD GRAY CLAY	399'	400'	
DARK BROWN - RED CLAY W/ WHITE SPECKS - UNSTABLE	400'	407'	
BROWN SANDY CLAY W/ GREEN CLAYSTONE STREAKS	407'	411'	
GRAY - BROWN CLAY	411'	417'	
BROWN CLAY STONE - HARD	417'	419'	
BLACK BASALT - MED. HARD	419'	434'	
HARD GRAY BASALT	434'	468'	
BLACK BASALT	468'	500'	
POROUS BLACK BASALT - W. BRG.	500'	506'	88'
HARD GRAY BASALT	506'	518'	
POROUS BASALT, WEATHERED + WTR. BRG.	518'	531'	88'
MED. HARD GRAY BASALT	531'	560'	
POROUS BASALT	560'	566'	
HARD GRAY BASALT	566'	570'	
BROKEN GRAY BASALT - WTR. BRG	570'	589'	90'
BLACK BASALT	589'	594'	

Date started _____ Completed _____

(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 _____
Signed _____ Date _____