

Wash
53662

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JUN 18 1998

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)WATER RESOURCES DEPT
SALEM, OREGONWELL I.D. # L 23631
START CARD # 114034

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number _____

Name I.S. PROPERTIES LIMITED PARTNERSHIP

Address 8205 SW HUNZIKER RD.

City TIGARD State OR Zip 97223

(2) TYPE OF WORK

 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

 Rotary Air Rotary Mud Cable Auger Other _____

(4) PROPOSED USE:

 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 482 ft.Explosives used Yes No Type _____ Amount _____

HOLE		SEAL			
Diameter	From	To	Material	From	To
14	0	56	Cement/Bento	56	
12 $\frac{1}{4}$	56	178	" "	56	178
8	178	243			
7 $\frac{1}{2}$	243	487			

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"	+2	178	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"/>
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"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material		
					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"/>	<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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Artesian	Flowing
Yield gal/min	Drawdown	Drill stem at	Time	
280		450		1 hr.
260		300		"
180		200		"

Temperature of water 56°F 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: 144-172

(9) LOCATION OF WELL by legal description:

County WASHINGTON Latitude _____ Longitude _____

Township 2S N or S Range 2W E or W. WM.

Section 17 SE 1/4 NE 1/4

Tax Lot 100 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) 26849 SW VANDERSCHURE RD
HILLSBORO, OR 97123

(10) STATIC WATER LEVEL:

68 ft. below land surface. Date 06/11/98

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 260

From	To	Estimated Flow Rate	SWL
260	487	280 GPM	68

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Topsoil w/brown clay	0	6	
Soft brown silty clay	6	44	
Sticky red-brown clay	44	52	
Decomp red-brown clay	52	120	
Firm gray-brown basalt	120	132	
Hard gray basalt	132	144	
Firm gray-brown basalt	144	172	w.b.
Hard gray basalt	172	183	
Firm gray-brown basalt	183	251	
Hard gray basalt	251	260	
Broken gray-brown basalt	260	312	68
Firm gray-black basalt	312	352	"
Firm gray-brown basalt	352	376	"
Hard gray basalt	376	385	"
Firm gray-brown basalt	385	392	"
Soft red basalt	392	398	"
Firm gray-blk,gray-brn basalt	398	440	"
Soft red-brown basalt	440	445	"
Firm gray-brown basalt	445	475	"
Gray-brown basalt,brkn,caving	475	487	68

Date started 06/02/98 Completed 06/11/98

(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 water supply well construction standards. Materials used and information reported above are true to the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 1266

Signed  Date 06/15/98