

**RECEIVED**  
JUN 13 1957

(1) OWNER: STATE ENGINEER  
Name Geo. Walker  
Address RT 1 Box 57

(2) LOCATION OF WELL:  
County Wash Owner's number, if any T-5  
33 Section 17 T. 1N R. 2 W.M.  
Bearing and distance from section or subdivision corner

TYPE OF WORK (check):  
New Well  Deepening  Reconditioning  Abandon   
If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):  
Domestic  Industrial  Municipal   
Irrigation  Test Well  Other

(5) TYPE OF WELL:  
Rotary  Driven   
Cable  Jetted   
Dug  Bored

(6) CASING INSTALLED:  
6" Diam. from 0 ft. to 58 ft. Gage 17  
6" Diam. from 55 ft. to 120 ft. Gage 3/16

(7) PERFORATIONS:  
Type of perforator used Torch  
Perforated?  Yes  No  
SIZE of perforations 4/8 in. by 12 in.  
2 rows perforations from 58 1/2 ft. to 120 ft.  
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. \_\_\_\_\_  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

(9) CONSTRUCTION:  
Was well gravel packed?  Yes  No Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Was a surface seal provided?  Yes  No To what depth? 15 ft.  
Material used in seal— Clay Cuttings  
Did any strata contain unusable water?  Yes  No  
Type of water? \_\_\_\_\_ Depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_

(10) WATER LEVELS:  
Static level 17 ft. below land surface Date 12-6-56  
Artesian pressure \_\_\_\_\_ lbs. per square inch Date \_\_\_\_\_

Log Accepted by:  
[Signed] Geo. Walker Date June 12, 1957  
(Owner)

(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: \_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.  
" " " " " "  
" " " " " "  
" " " " " "  
Bailer test 30 gal./min. with 20 ft. drawdown after \_\_\_\_\_ hrs.  
Artesian flow \_\_\_\_\_ g.p.m. Date \_\_\_\_\_  
Temperature of water \_\_\_\_\_ Was a chemical analysis made?  Yes  No

(12) WELL LOG: Diameter of well 6 inches.  
Depth drilled 135 ft. Depth of completed well 120 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
Top Soil	0	3
Brown Sandy	3	27
Blue Clay	27	29
Fine Br Sand	29	56
69 gpm	56	61 1/2
Squeezing Brown Clay	61 1/2	66 1/2
Med coarse Brown Sd	69	76
Hard Layer Brownish		
Blue Clay	76	78
Cemented Brown Sd	78	82
Squeezing Brown Clay	82	85
Coarse Br Sand	85	90
Coarse Br Sand	90	99
Br Sandy Clay	99	102 1/2
Hard Brown Clay	102 1/2	108
Squeezing	108	113
Blue Sandy Clay	108	113
Brown	113	115
Sand	115	117
Hard Green Clay	117	120
Brown Sand	120	124
Hard Green Clay	124	126
Layered Br Sd & Clay	126	135

Work started 11-20 1956 Completed 12-6 1956

(13) PUMP:  
Manufacturer's Name \_\_\_\_\_  
Type: \_\_\_\_\_ H.P. \_\_\_\_\_

Well Driller's Statement:  
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  
NAME Lee Barton Well Drilling  
(Person, firm, or corporation) (Type or print)  
Address RT 1 Box 933 Hellsboro Ore  
Driller's well number \_\_\_\_\_  
[Signed] Lee Barton  
(Well Driller)  
License No. 28 Date 3-30 1957

JUN 17 1997

WELL IDENTIFICATION FORM

Owner's Well Number: 2 WATER RESOURCES DE SALEM, OREGON

CURRENT WELL OWNER:

Representative's Phone (503) 647-2777

Name: Richard & Carol Walters

Mailing Address: 13343 Grangeville Blvd.

City: Hanford State: Ca. Zip: 93230-9695

WELL LOCATION:

WASH 5398

County: Washington Latitude: N45° Longitude: W122°

Township: 1 N or S, Range: 2 E or W Section: 17 SE 1/4 SE 1/4

Tax Lot Number: 906

Street Address of Well (if different from above): 26630 NW Meek Rd.

Hillsboro, OR 97124

If a well report is available for this well, please attach a copy of it to this form and return. It is not necessary for you to complete the remainder of the form if the well report is attached. If a well report is not available, please complete the remainder of the form to the best of your ability.

\* Representative: Donna Hulme / Land Use Consultants, L.L.C. 24880 NW Pederson Rd. Hillsboro, OR 97124-9210

WELL INFORMATION:

Start Card Number: Approx. Construction Date:

Well Constructor:

Name of Owner at Time of Construction:

Well Depth (in feet): Static Water Level (in feet):

Diameter of Exposed Well Casing (in inches):

Does this well have a formal water right associated with it? Yes: X No: If yes:

Application #: Permit #: 6877 Certificate #: 30843

Please Return Completed Form to: Oregon Water Resources Department 158 12th Street NE Salem, OR 97310

(Office use only)

Well Identification Number: 15509