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1 of 2

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STATE OF OREGON  
WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.  
(as required by ORS 537.765) SALEM, OREGON

WELL I.D. # L16382  
START CARD # 104288

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

(1) OWNER:

Well Number ASR #1  
Name Tualatin Valley Water District  
Address 1850 SW 170th Ave.  
City Beaverton State Oregon Zip 97006

(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 ASR  
 Thermal  Injection  Livestock  Other monitoring

(5) BORE HOLE CONSTRUCTION:

Special Construction approval  Yes  No Depth of Completed Well 410 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
20	0	171	cement	0	171	210 sacks
15	171	410				

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: 16	+1.5	171	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 12"	161	410	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations Method Holte air perforator  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
175	405	1/4 x 1 1/2	13200	12"	12"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
500+	N/A	410	1 hr.

Temperature of water 56 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: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:

County Washington Longitude \_\_\_\_\_  
Township 1S N or S Range 1W E or W. WM.  
Section 17 NE 1/4 SW 1/4  
Tax Lot 2400 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Schuepac Park

(10) STATIC WATER LEVEL:

91.3 ft. below land surface. Date 11-24-98  
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	410	500+ GPM	91.3

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
soil	0	1	
Clay brown	1	17	
clay grey and brown	17	62.5	
rock soft very wthrd	62.5	80	
basalt green and brown	80		
wthrd and porous		100	
basalt grey fractured	100	140	
basalt hard	140	155	
basalt grey hard	155	171	
basalt grey fractured	171		
and weathered		185	
basalt hard	185	188	
basalt frac and wthrd	188	202	
basalt hard	202	235	
basalt gry brn medium	235	244	
basalt rounded blk grn	244	258	
basalt frac rounded	258		
grey and brown		295	
basalt grey fractured	295	362	

SEE NEXT

Date started 10-2-98 Completed 11-24-98

(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.

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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed [Signature] WWC Number 1358  
Date 12-1-98

FEB 26 1999

2 of 2

STATE OF OREGON WATER SUPPLY WELL REPORT WATER RESOURCES DEPT. SALEM, OREGON (as required by ORS 537.765)

WELL I.D. # L START CARD #

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

(1) OWNER: Well Number Name TVWD #2 Address City State Zip

(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 ft. Explosives used Yes No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds

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: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

(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:

(9) 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)

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

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Entries include basalt grey fractured and weathered, basalt hard grey some fractured, basalt blk fractured.

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 water supply well construction standards.

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.

WWC Number 1358 Signed Date 12-1-98