RECEIVED

MAY 06 1999

WATER RESOURCES DEPT.
SALEM, OREGON

WASH
54701

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

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

WELL I.D. # L 123578
START CARD # 113808

(1) OWNER: Well Number
Name Steven R. Kaer
Address 9416 NW Wood Rose Loop
City Portland State Or Zip 97229

(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 364 ft.
Explosives used ☐ Yes ☒ No Type ____ Amount ____

Diameter	From	To	Material	From	To	Sacks or pounds
10	0	64	Bentonite	0	50	28
6	64	364				

How was seal placed: Method ☐A ☐B ☐C ☐D ☐E
☒ Other Bentonite
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:	10	+1	64	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4	50	364	160	☐	☒	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) 64

(7) PERFORATIONS/SCREENS:
☒ Perforations Method Saw
☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
300	364	3/16	60	4		☐	☒
						☐	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
25		350	1 hr.

Temperature of water 54° 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 Wash Latitude ____ Longitude ____
Township 2 N of (S) Range 1 E of (W) WM.
Section 35 SE 1/4 SW 1/4
Tax Lot 401 Lot ____ Block ____ Subdivision ____
Street Address of Well (or nearest address) 23560 SW Boones Ferry Rd. Tualatin

(10) STATIC WATER LEVEL:
194 ft. below land surface. Date 5-4-99
Artesian pressure ____ lb. per square inch. Date ____

(11) WATER BEARING ZONES:
Depth at which water was first found 344

From	To	Estimated Flow Rate	SWL
328	364	25+	194

(12) WELL LOG:
Ground Elevation ____

Material	From	To	SWL
Top soil	0	2	
Clay brown	2	18	
Rock brown	18	24	
Rock soft clay brown	24	38	
Basalt gray med.	38	71	
" brown soft	71	110	
" gray med.	110	203	194
" brown soft	203	216	
" gray med.	216	255	
" brown soft	255	264	
" gray med.	264	284	
" brown soft	284	316	
" brown gray soft	316	328	
" brown soft	328	364	

Date started 4-30-99 Completed 5-3-99

(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 1229
Signed Steven R. Kaer Date 5-4-99

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER