

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 517.745)

WASH
57027

DRAFT

WELL ID #1
START CARD #

N/A
N/A

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

(1) **WELL IDENTIFICATION**
Name: Moore Eric Tak
Address: PO Box 30569
City: Portland State: OR ZIP: 97230
Well Number: 1

(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 Abandonment

(5) **BORE HOLE CONSTRUCTION:**
Special Construction approval ☐ Yes ☐ No Depth of Completed Well: 38-42' ft.
Explosives used ☐ Yes ☐ No Type: _____ Amount: _____

HOLE SEAL
Discontinuity From To Material From To Backfill or grout
38' 0 42' N/A

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: Diameter From To Gauge End Plastic Welded Threaded
N/A
Liner: _____

Final location of shoe(s): _____

(7) **PERFORATIONS/SCREENS:**
☐ Perforations Method N/A
☐ Screens Type: _____ Material: _____
From To Slot size Number Diameter Tube/pipe size Casing Liner

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

☐ Pump ☐ Bailor ☐ Air ☐ Flowing Artesian
Yield gallons Drainers Drill stem at Time
N/A

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? ☐ Two little
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____
Depth of strata: _____

(9) **LOCATION OF WELL** by legal description:
County: Washington Latitude: _____ Longitude: _____
Township: N 1 N or S Range: 1W E or W, W.M.
Section: 19 Sub: 1/4 NW 1/4
Tax Lot: 104 Lot: _____ Block: _____ Subdivision: _____
Street Address of Well (or nearest address): 5550 NW 185th

(10) **STATIC WATER LEVEL:**
10' ft. below land surface. Date: 2/14/01

(11) **WATER BEARING ZONES:**
Depth at which water was first found: N/A

From	To	Estimated Flow Rate	SWL

(12) **WELL LOG:**
Ground Elevation: unk

Material	From	To	SWL
<u>put pump + pump dug well</u>			
<u>Empty - No Debris</u>			
<u>Fill dug well to surface</u>			
<u>with controlled density</u>			
<u>CEMENT - 1 1/2 Trucks</u>			
<u>REMOVED ACCESSIBLE CURBING</u>			
RECEIVED			
FEB 21 2001			
WATER RESOURCES DEPT.			
SALEM, OREGON			

Date started: 2/14/01 Completed: 2/14/01

(bonded) 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: 570
Signed: Doug Pennington Date: 2/18/01

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