

WASH 58269  
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58269

249704

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

(START CARD) # 142936

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

(1) OWNER: Well Number 2  
Name Horning Hideout  
Address 20277 N.W. Brunswick Rd.  
City North Plains State Oregon Zip 97133

(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 Campground

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 305 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds
10	0	50	Bentonite	0	50	30
6	50	305	-	-	-	-

How was seal placed: Method  A  B  C  D  E  
 Other Placed in dry + Prodded  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6	42	98	290	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4 1/2	65	305	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 98

(7) PERFORATIONS/SCREENS:  
 Perforations Method Drilled  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
245	305	-	240	7/16	4 1/2	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

	Yield gal/min	Drawdown	Drill stem at	Flowing Time
<input type="checkbox"/> Pump	9	239	270	1 hr.
<input type="checkbox"/> Bailer				
<input checked="" type="checkbox"/> Air				
<input type="checkbox"/> Artesian				

Temperature of water 55 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 Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 2N N or S Range 3W E or W. WM.  
Section 11 NE 1/4 NE 1/4  
Tax Lot 100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:  
31 ft. below land surface. Date 4-22-02  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 17

From	To	Estimated Flow Rate	SWL
17	18	7	18
257	305	9	31

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Top soil	0	1	
Redish Brown Clay	1	35	
Brown Clay	35	44	
Med. Grey Claystone	44	305	31

RECEIVED  
APR 24 2002  
WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 4-17-02 Completed 4-22-02

(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 1221  
Signed Larry C Evey Date 4-22-02