RECEIVED 2s//w/2/2

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STATE OF OREGON	(12)
WATER SUPPLY WELL REPORT (as required by ORS 537.765)	1/08
Instructions for completing this report are or	the last p
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(START CARD)#	7642	29	
EPT.			

This is decions for completing this report are on the last page of this form. At I			
(1) OWNER: Well Number #2-95	(9) LOCATION OF WELL by legal description:		
Name LOEN_NURSERY	County Wash. Latitude Longitude		
Address 18710 SW PACIFIC DR.	Township 2S N or S Range 1W E or W. WM.		
City SHERWOOD State OR Zip 97140	Section 21 SW 1/4 NW 1/4		
(2) TYPE OF WORK	Tax Lot Lot Block Subdivision	-	
New Well Deepening Alteration (repair/recondition) Abandonment	Street Address of Well (or nearest address) Loen Nursery		
(3) DRILL METHOD:	18710 SW Pacific Dr., Sherwood, Or.		
	(10) STATIC WATER LEVEL:	_	
Rotary Air Arctary Mud Cable Auger			
Other	54 ft. below land surface. Date $05/23/95$		
(4) PROPOSED USE:	Artesian pressurelb. per square inch. Date	_	
Domestic Community Industrial Irrigation	(11) WATER BEARING ZONES:		
Thermal Injection Livestock Other			
(5) BORE HOLE CONSTRUCTION:	Depth at which water was first found55		
Special Construction approval Yes No Depth of Completed Well 95 ft.			
Explosives used Yes No Type Amount		VL	
HOLE SEAL	55 90 25 GPM 54	<del> </del>	
Diameter From To Material From To Sacks or pounds			
10" 0 95 Bent.#8mesh 0 25 14 sacks			
Sand 25 95 25 sacks			
	(12) WELL LOG:		
How was seal placed: Method A B C D E	Ground Elevation		
X Other Poured into dry annular	Giodila Elevation		
Backfill placed from ft. to ft. Material	Material From To SWL	_	
Gravel placed from 25 ft. to 95 ft. Size of gravel 1-c sand		<u> </u>	
(6) CASING/LINER:	Fine brown sandy clay 1 16		
	Fine-med. brown sand w/silts 16 38		
1 1 - 1	Fine-coarse brown sand 38 75 54	_	
Casing: 6" +1 50 200ps	Gray & gray-brown sand w/occ.		
6" 90 95 200ps □			
8" +1 -6 250 🖺 🗆 🕮	wood   75   90   54		
	Sticky gray clay 90 95		
Liner:			
Final location of shoe(s)			
(7) PERFORATIONS/SCREENS:			
Perforations Method			
XXScreens Type Slotted Material PVC			
Slot Tele/pipe From To size Number Diameter , size Casing Liner			
50 90 .020 6" Pipe X			
(8) WELL TESTS: Minimum testing time is 1 hour	Date started 05/22/95 Completed 05/23/95		
Flowing	(unbonded) Water Well Constructor Certification:		
Pump XBailer Air Artesian	I certify that the work I performed on the construction, alteration, or abandonm	ent	
Yield gal/min Drawdown Drill stem at Time	of this well is in compliance with Oregon water supply well construction standard	s.	
· 25 41' 1 hr. <sup>1</sup> / <sub>25</sub>	Materials used and information reported above are true to the best of my knowledge and belief.	śt	
111112	, WWC Number 1492		
	Signed Mel Signey Date 05/25/95	-	
Temperature of water 53 F Depth Artesian Flow Found	(bonded) Water Well Constructor Certification:	<u></u>	
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Was a water analysis done? X Yes By whom AMJ	I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work		
Did any strata contain water not suitable for intended use?  Too little	performed during this time is in compliance with Oregon water supply well		
Salty Muddy Odor Colored Other construction standards. This report is true to the best of my knowledge and bel			
Depth of strata: WWC Number 1266			
	Signed	5	
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