

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WASH 77267

12/10/2018

WELL I.D. LABEL# L

START CARD #

ORIGINAL LOG #

131336

1041290

(1) LAND OWNER

Owner Well I.D. 3176

First Name _____ Last Name _____
Company SEIJE YANO REVOC.TRUST & MASAE YANO REVOC.TRUST
Address 10020 SW 141ST AVE
City BEAVERTON State OR Zip 97008

(2) TYPE OF WORK
☒ New Well ☐ Deepening ☐ Conversion

☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)
(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal: _____

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other _____
(4) PROPOSED USE
☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____
(5) BORE HOLE CONSTRUCTIONSpecial Standard ☐ (Attach copy)

Depth of Completed Well 187.00 ft.

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amt	sacks/lbs
10	0	79	Bentonite Chips	0	79	44	S
6	79	201				Calculated	36
						Calculated	

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other POUR/PROBE/HYDRATE

Backfill placed from 187 ft. to 201 ft. Material CAVING ROCK

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Yes Type _____ Amount _____**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount

Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
☒	☐	6	☒	1	79	.25	☒	☐	☒	☐
☐	☒	4	☐	7	107	sch40	☐	☒	☐	☒
☐	☐	4	☐	127	147	sch40	☐	☒	☐	☒
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 79Temp casing ☒ Yes Dia 10 From + ☒ 1 To 5**(7) PERFORATIONS/SCREENS**

Perforations Method _____

Screens Type machine slot

Material PVC

Perf/	Casing/	Screen	Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Liner	4	107	127	.032					4
Screen	Liner	4	147	187	.032					4

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
20		200	1
20		180	2

Temperature 54 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 44 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County WASHINGTON Twp 2.00 S N/S Range 2.00 W E/W WM

Sec 35 SW 1/4 of the SW 1/4 Tax Lot 100

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 45.34923330 DMS or DD

Long _____ ° _____ ' _____ " or -122.90574932 DMS or DD

☒ Street address of well ☐ Nearest address

21845 SW CHAPMAN RD, SHERWOOD

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	11/14/2018			67

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES

Depth water was first found 139.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
11/14/2018	139	186	20			67

(11) WELL LOG

Ground Elevation _____

Material	From	To
Top Soil	0	6
Clay, Tan	6	13
Clay, brown w/weathered rock	13	17
Sandstone, gray w/brown clay	17	44
Basalt, decayed w/clay	44	67
Basalt, hard gray	67	139
Basalt, decayed, vesic, w/some ash	139	186
Basalt, medium gray	186	187
Basalt, gray loose/cavey grabby broken	187	201

Date Started 11/13/2018

Completed 11/14/2018

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1438 Date 11/15/2018

Signed DAVID PAYSINGER (E-filed)

Contact Info (optional) bluewaterdrilling.com || 503 868 7878

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

WASH 77267

12/10/2018

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 45.3492332958 Datum: WGS84

Longitude: -122.90574932040

Township/Range/Section/Quarter-Quarter Section:

WM 2S 2W 35 SWSW

Address of Well:

21845 SW CHAPMAN RD, SHERWOOD

Well Label: 131336

Printed: November 15, 2018

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

