

DATA COLLECTION SHEET

WELL I.D. # L _____

(1) LAND OWNER Owner Well Number Well 1
 First Name _____ Last Name _____
 Company Ross Island Sand & Gravel Co.
 Address 4315 SE McLaughlin Blvd
 City Portland State OR Zip 97282

(2) TYPE OF WELL Water Well Monitoring Well Piezometer

(3) CURRENT OBSERVED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(4) BORE HOLE CONSTRUCTION Estimated Depth of Well 300 ft.

| BORE HOLE | | | SEAL | | | |
|-----------|------|----|----------|------|----|----------------|
| Diameter | From | To | Material | From | To | Sacks / Pounds |
| | | | | | | |
| | | | | | | |
| | | | | | | |

(5) CASING/LINER

| Diameter | From | To | Gauge | Steel | Plastic | Welded | Threaded |
|-------------------|------|----|-------|--------------------------|--------------------------|--------------------------|--------------------------|
| Casing: <u>6"</u> | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Liner: | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Drive Shoe used Inside Outside None
 Final location of shoe(s) _____

(6) PERFORATIONS/SCREENS

Perforations Screens Type _____ Material _____

| From | To | Approx Slot Size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|----|------------------|--------|----------|----------------|--------------------------|--------------------------|
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | | | | <input type="checkbox"/> | <input type="checkbox"/> |

(7) WELL TESTS Date _____

Pump Bailer Air Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time |
|---------------|----------|---------------|------|
| | | | |
| | | | |

Temperature of water _____
 Was a water analysis done? Yes By whom _____

(8) LOCATION OF WELL (legal description)
 County Washington County Map No. _____
 Township 1 N S Range 2 E W WM Section 34
SE 1/4 of the SE 1/4 Tax Lot _____ Lot _____
 Lat _____ ° _____ ' _____ " or _____ DMS or DD
 Long _____ ° _____ ' _____ " or _____ DMS or DD
 Street Address of Well (or nearest address) 800' N, 130' W fr SE cor. sec 34

(9) STATIC WATER LEVEL _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(10) WATER BEARING ZONES

| From | To | Estimated Flow Rate | SWL |
|------|----|---------------------|-----|
| | | | |
| | | | |
| | | | |
| | | | |

(11) LITHOLOGY Ground Elevation _____

| Material | From | To |
|----------|------|----|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Estimated date originally constructed _____

SOURCE OF DATA / INFO USGS On-Site Observation
 Interview Other Transfer file T-7365

COMPILED BY Halley Barnett, Groundwater
 DATE 9/5/2019