

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

RECEIVED
 JUL 10 1991
 WATER RESOURCES DEPT. (START CARD) # 31043

20130136 Ch

WASH 996

(1) OWNER: Well Number: _____
 Name PUMPKIN RIDGE GOLF CLUB
 Address 12930 Old Pumpkin Ridge Rd
 City Cornelius State OR Zip 97113

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 410 ft.
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10	0	392	Cement	0	55	19 sks
			Drill gel	55	350	
			Cement	350	392	17 sks
6	392	410				

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/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	6	+1	392	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of sheets: _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	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"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
25		400	1 hr.

Temperature of water 56 °F Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom A. M. Janssen
 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 36 NW 1/4 SW 1/4
 Tax Lot 101 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 12930 Old Pumpkin Ridge Rd, Cornelius, OR

(10) STATIC WATER LEVEL:
29 ft. below land surface. Date 07/02/91
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 397

From	To	Estimated Flow Rate	SWL
397	407	25 gpm	29

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Brown Clay	0	16	
Soft blue-brown clay	16	31	
Sticky red-brown clay	31	44	
Sticky gray-brown clay	44	72	
Sandy brown clay	72	99	
Blue-gray silty clay	99	140	
Wood	140	149	
Sticky blue-gray clay	149	169	
Sticky gray-brown clay	169	201	
Wood	201	217	
Sticky gray clay	217	262	
Sticky red-brown clay	262	334	
Decomp brown basalt	334	370	
Firm gray-brown basalt	370	374	
Decomp brown basalt	374	382	
Firm gray-brown basalt	382	410	29

Date started 06/24/91 Completed 07/02/91

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed _____ WWC Number _____
 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed [Signature] WWC Number 1266
 Date 07/03/91