

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

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

(START CARD) # 82635

(1) OWNER:

Name Tom Edwards
Address 8595 Worden Hill Rd
City Dundee State OR Zip 97115

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Alteration (repair/res. etc.)

(3) DRILL METHOD:

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other

(4) PROPOSED USE:

☒ Domestic ☐ Community ☐ Industrial ☐ Thermal ☐ Injection ☐ Livestock

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 345 ft.

Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
10"	0	79'	Cement & Bentonite)	0	79'	25 Sacks	
6"	79	345					

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:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6"	+1'	79'	.25	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) 79'

(7) PERFORATIONS/SCREENS:

		Method		Type		Material	
From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump	☐ Bailer	☒ Air	☐ Flowing
Yield gal/min	Drawdown	Drill stem at	Artesian
18 GPM		345'	1 hr.

Temperature of water 58° 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: _____

RECEIVED

YAMHILL
50138

MAY 16 1996

035/03W/27

SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County Yamhill Latitude N 45° 16' 69" Longitude W 123.0217°
Township 3-S N or S Range 3-W E or W. WM.
Section 27 SE 1/4 1/4
Tax Lot 2300 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 8595 Worden Hill Rd, Dundee, OR 97115

(10) STATIC WATER LEVEL:

150' ft. below land surface. Date 4/30/96
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 175'

From	To	Estimated Flow Rate	SWL
175'		2 GPM	n/a
330'	345'	18 GPM	150'

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Top Soil	0	2	
Red/Brown Clay	2	6	
Soft Brown Decomposed Basalt	6	22	
MH Brown Basalt	22	35	
H Brown Basalt	35	40	
Fractured Broken Brwn Bas.	40	65	
H Brwn Decomposed Basalt	65	75	
H Gray Basalt	75	170	
MH Decomp. Gray Basalt	170	185	
MH Decomp Green Basalt	185	200	
MH Gray Basalt	200	205	
MH Gray Decomp. Basalt	205	220	
MH Brown Frac. Basalt	220	225	
H Green Basalt	225	275	
H Gray/Brown Basalt	275	300	
MH Gray Basalt	300	305	
MH Black & Brown Basalt	305	330	
H Gray Basalt	330	345	150'

Date started 4/29/96 Completed 4/30/96

(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 _____ Date 5/12/96

(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 645 Date 5/12/96

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER