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STATE OF OREGON  
WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.  
(as required by ORS 537.765) SALEM, OREGON

WELL I.D. # L 125483  
START CARD # 114348

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

(1) OWNER: Well Number \_\_\_\_\_  
Name Scott Baldwin  
Address 1326 Stonehewer Dr.  
City Westlinn State Or. Zip 97068

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 231 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
11"	0	36	Bentonite	0	36	17
6"	36	260				

How was seal placed: Method  A  B  C  D  E  
 Other Bentonite (Poured Slowly)  
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"	0	36	25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	3	231	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method Electric Drill  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
191	231		150	5/8"	Circular	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
35	Air Lift	260	4 hr.

Pump  Bailer  Air  Flowing  
 Artesian

Temperature of water 53° 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: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County Yamhill Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 135 N or S Range 3W E or W. WM.  
Section 33 NW 1/4 SE 1/4  
Tax Lot 3333 Ext 801 Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 17545 N.E. Archery Summit Rd. Dayton Or 97114

(10) STATIC WATER LEVEL:  
128 ft. below land surface. Date 3/19/99  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 191

From	To	Estimated Flow Rate	SWL
191	230	35	128

(12) WELL LOG:  
Ground Elevation Approx 600'

Material	From	To	SWL
Topsoil	0	5	
Red Clay	3	9	
Red + yellow Decomp. Clay	9	21	
Brown + Gray Decomp. Clay	21	30	
Coarse Grained Gray basalt w/ thin layers of Red sh.	30	260	

Date started 3/11/99 Completed 3/18/99

(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.

Signed Not Appl. 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Randall A. Wilcox WWC Number 795 Date 3/22/99