

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

(1) OWNER:

Well Number: 99-001 WATER RESOURCES DEPT
SALEM, OREGON

Name: Scott Springer
Address: 16100 Sw Century Drive, #74
City: Sherwood State: OR Zip: 97140

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

(3) DRILL METHOD:
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other:

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No
Depth of Completed Well 622
Explosives Used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	103	cement	35	103	53 bags
			bent chps	0	35	14 bags
8"	103	377	cement	280	377	16 bags
6"	377	624				

How was seal placed: Method ☒ A ☐ B ☒ C ☐ D ☐ E

☒ Other _____
Backfill placed from 103 to 280 Material cement
from _____ to _____ Material _____
Gravel placed from _____ to _____ Size of gravel _____

(6) CASING/LINER:

CASING:				Steel	Plastic	Welded	Threaded
Diameter	From	To	Gauge				
6"	+18"	377	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

LINER:				Steel	Plastic	Welded	Threaded
Diameter	From	To	Gauge				
4"	-2	622	160#	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of Shoe(s):

(7) PERFORATIONS/SCREENS:

						Casing	Liner
From	To	Slot Size	No.	Diameter	Tele/pipe size		
562	602	1/8x7	72	4"	pipe	<input type="checkbox"/>	<input checked="" type="checkbox"/>
612	622	1/8x7	18	4"	pipe	<input type="checkbox"/>	<input checked="" 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

Yield gpm	Drawdown	Drill Stem at	Time
45	n/a	615	1 hr.
45	n/a	615	2 hrs

Temperature of water 55 Depth Artesian Flow Found
Was a water analysis done? no By whom:
Did any strata contain water not suitable for intended use? (explain)
Depth of Strata: _____

RECEIVED

YAMHILL
51949

MAR 8 1999

WELL ID # L 18954
START CARD # 102835

(9) LOCATION OF WELL by legal description:

County: Yamhill Latitude: _____ Longitude: _____
Township: 3S Range: 2W
Section: 3 NE 1/4 SW 1/4
Tax Lot: 1205 Lot: 4 Block: _____ Subdivision: _____
Street Address of Well (or nearest address) Crystal View Court
@ Chehalem View Estates

(10) STATIC WATER LEVEL:

404 Ft. below land surface Date 2-3-99
Artesian pressure _____ lb. per sq. in. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 85		Est. Flow Rate	SWL
From	To		
85	92	+ 5 gpm	?
243	261	25 gpm	?
479	501	11 gpm	404
564	611	34 gpm	404

(12) WELL LOG:

Ground Elevation:

Material	From	To	SWL
top soil	0	1	
clay brwn	1	19	
rock decomp reddish brwn w/	19		
brwn clay		85	
basalt decomp brwn vesic	85	92	?
basalt gray med	92	130	
basalt gray med-hrd	130	162	
basalt brwn/gray fract med	162	197	
basalt brwn decomp vesic	197	211	
basalt gray med-hrd fract	211	243	
basalt decomp vesic brwn	243	261	?
basalt gray hrd fract	261	339	
basalt gray/blk/brwn fract	339	361	
baslt decomp brwn vesic	361	369	
basalt blk hrd	369	424	
basalt decomp brwn	424	432	
basalt brwn/gray med fract	432	456	
basalt brwn/gray bkn loose	456	479	
basalt decomp brwn/red vesic	479	501	404
basalt gray hrd fract	501	564	
basalt brwn/gray bkn very loose	564		404
slightly decomp		583	
basalt gray hrd fract	583	589	
basalt decomp brwn vesic bkn	589	611	404
basalt gray hrd fract	611	624	

Date Started: 1-21-99

Completed: 2-3-99

(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.

ARROW DRILLING WWC Number _____
Signed (503) 538-4422 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.

WWC Number 1483
2-4-99