

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

DESC 869

16S/12E/10bd

(START CARD) # W29379 labeled

(1) OWNER:
 Name David Smith
 Address 509 Queen Anne North Suite 336
 City Seattle State Wa Zip 98109

Well Number: _____

(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 438 ft.
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	34	cement	34	0	74 sacks
8"	34	438				

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:	8"	+1	34	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	6"	-3	438	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoets) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method machine
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
228						<input type="checkbox"/>	<input type="checkbox"/>
418	438		228	1/8by3		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____
 20 _____ 438 _____ 1 hr.

Temperature of water 52 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 Des Latitude _____ Longitude _____
 Township 16 S N or S. Range 12 E E or W. W.M.
 Section 10 SE 1/4 NW 1/4
 Tax Lot 401 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____
7433 SW 77th Redmond, Ore

(10) STATIC WATER LEVEL:
364 ft. below land surface. Date 4-25-91
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 381

From	To	Estimated Flow Rate	SWL
381	438		364

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
sandy soil	0	1	
white tuff	1	13	
gray brkn basalt	13	21	
gray basalt	21	72	
brn clay congl	72	90	
brn ss congl	90	108	
gray ss	108	125	
tan ss	125	183	
gray congl med	183	206	
gray basalt	206	230	
brn ss	230	274	
gray ss	274	338	
brn ss fine	338	381	
black sand (WB)	381	408	
fine to med gravel (WB)	408	438	

RECEIVED
MAY 10 1991
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 4-20-91 Completed 4-25-91

(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 [Signature] WWC Number 1317
 Date 4-27-91

(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 595
 Date 4-27-91