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2s/1e/20cc

JUL - 7 1989

(START CARD) # 9273

STATE OF OREGON  
WATER WELL REPORT  
(as required by ORS 537.785)

CLAC 03153

Well Number: 8-89 WATER RESOURCES DEPT.

LOCATION OF WELL by legal description:

County \_\_\_\_\_ Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 2S N or S, Range 1E E or W, WM.  
Section 20 SW 1/4 SW 1/4  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 3940 SW Halcyon Road, Tualatin, Oregon 97062

(1) OWNER:

Name P&D NURSERY  
Address 3940 SW Halcyon Road  
City Tualatin State Ore Zip 97062

(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 725 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12	0	35	Cement	0	35	27 s.
8	35	725				

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:	8	+2	318	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	6	296	725	188	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 318 ft.

(7) PERFORATIONS/SCREENS:

Perforations Method Saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
425	723	1/8	1020			<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
70		700	1 hr.
60		500	1-1/2
50		300	2

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 High iron  
Depth of strata: 211-219

(10) STATIC WATER LEVEL:

92 ft. below land surface. Date 6-9-89  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 406 ft.

From	To	Estimated Flow Rate	SWL
406 ft.	425 ft.	15 gpm	92
450 ft.	463 ft.	35 gpm	92
710 ft.	715 ft.	20 gpm	92

(12) WELL LOG:

Ground elevation \_\_\_\_\_

Material	From	To	SWL
Clay-sandy-brown	0	41	
Clay-silty-brown	41	70	
Gravel	70	72	
Sand-brown	72	98	
Clay-gray	98	103	
Sand-brown	103	108	
Gravel-sand	108	123	
Clay-gray	123	127	
Clay-gray-brown	127	169	
Clay-gray	169	173	
Clay-light gray	173	187	
Clay-gray	187	208	
Clay-sandy-gray	208	211	
Pea gravel-sand-gray	211	219	106
Clay-gray	219	229	
Clay-sandy-gray	229	275	
Clay-brown	275	308	
Basalt-brown-soft	308	313	
Basalt-med.-gray	313	327	
Basalt-hard-dark gray	327	406	
Basalt-clay seams-gray	406	421	92
Basalt-gray	421	425	
Basalt-soft-brown	425	442	

Date started 3-22-89 Completed 6-9-89

(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.

WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ 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.

WWC Number \_\_\_\_\_  
Signed *Paul L. McConnell* Date 6-21-89

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28/1E/20

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

(START CARD) # 9273

(1) OWNER:

Name P&D NURSERY(cont.)

Well Number: 8-89

WATER RESOURCES DEPT. SALEM, OREGON LOCATION OF WELL by legal description:

Address City State Zip

County Latitude Longitude Township N or S, Range E or W, WM. Section 1/4 1/4 Tax Lot Lot Block Subdivision Street Address of Well (or nearest address)

(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 ft. Explosives used Type Amount

Table with columns: HOLE Diameter, SEAL Material, Amount sacks or pounds

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:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations Method Screens Type Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Pump Bailer Air Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem at, Time

(10) STATIC WATER LEVEL:

ft. below land surface. Date Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Table with columns: Material, From, To, SWL

Date started Completed

(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.

Signed WWC Number Date

(bonded) Water Well Constructor Certification:

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