

25/1E/20dc

JUL 18 1990

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

CLAC 115

(START CARD) # 17699

WATER RESOURCES DEPT

(1) OWNER: Name West Linn School District, Address P.O. Box 100, City West Linn State OR Zip 97068

LOCATION OF WELL by legal description: County Clackamas, Township 2S, Range 1E, Section 20, SW 1/4 SE 1/4, Street Address of Well 19875 SW Stafford Rd. Tualatin, OR

(2) TYPE OF WORK: [X] New Well, [] Deepen, [] Recondition, [] Abandon

(3) DRILL METHOD: [X] Rotary Air, [X] Rotary Mud, [] Cable, [] Other

(4) PROPOSED USE: [] Domestic, [X] Community, [] Industrial, [] Irrigation, [] Thermal, [] Injection, [] Other

(10) STATIC WATER LEVEL: 80 ft. below land surface, Date 07/09/90, Artesian pressure lb. per square inch.

(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No, Depth of Completed Well 440 ft., Explosives used Type Amount

(11) WATER BEARING ZONES: Depth at which water was first found 400

Table with columns: HOLE Diameter, From, To; SEAL Material, From, To; Amount sacks or pounds. Includes entries for Drill/Gel and Cem/Gel.

Table with columns: From, To, Estimated Flow Rate, SWL. Includes entry for 400 to 440 ft depth with 400 gpm flow rate and 80 SWL.

How was seal placed: Method [] A [] B [X] C [X] D [] E, Backfill placed from ft. to ft. Material, Gravel placed from ft. to ft. Size of gravel

(12) WELL LOG: Ground elevation

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes entries for Casing and Liner.

Table with columns: Material, From, To, SWL. Lists soil layers such as Topsoil, Brown clay, Soft brown silty clay, etc.

(7) PERFORATIONS/SCREENS: [] Perforations Method, [] Screens Type Material

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

Date started 06/21/90 Completed 07/09/90

(8) WELL TESTS: Minimum testing time is 1 hour. [X] Pump, [] Bailer, [] Air, [] Flowing Artesian. Yield gal/min 400, Drawdown 31, Drill stem at 4hr.

(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.

Temperature of water, 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

(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.

JUL 18 1990

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

WATER RESOURCES DEPARTMENT (START CARD) # 17699

SALEM, OREGON

(1) OWNER: West Linn School District
Name: West Linn School District
Address: P.O. Box 100
City: West Linn State: OR Zip: 97068

(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 From, To, Material, Amount sacks or pounds

How was seal placed: Method A B C D E
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
Yield gal/min Drawdown Drill stem at Time

Temperature of water _____ 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:

Clackamas
County _____ Latitude _____ Longitude _____
Township 2S N or S, Range 1E E or W, WM.
Section 20 SW 1/4 SE 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 19875 SW Stafford Rd/
Tualatin, OR

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

(11) WATER BEARING ZONES:
Depth at which water was first found _____
Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground elevation _____

Table with columns: Material, From, To, SWL
Continued
Soft Visicular brown basalt 415 420
Broken gray-brown basalt 420 440

Date started 06/21/90 Completed 07/09/90

(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 _____ 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 well construction standards. This report is true to the best of my knowledge and belief.
Signed _____ WWC Number 1266 Date 07/13/90