

APR 10 1990

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

WATER RESOURCES DEPT.  
SALEM, OREGON

MULT 005

2N/2W/14cd

(START CARD) # 17971

(1) OWNER: Well Number: \_\_\_\_\_  
Name George Sowder/Judy Friedman  
Address 16618 NW Skyline Blvd  
City Portland State OR Zip 97231

(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    
Explosives used   Type \_\_\_\_\_ Amount \_\_\_\_\_  
Depth of Completed Well 705 ft.

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
10	0	276	Cem/gel	0	80	20 sacks
			Drill/gel	80	230	
			Cem/gel	230	276	10 sacks
6 3/4	276	450				

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6	+1	280	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<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"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 9 Drawdown \_\_\_\_\_ Drill stem at 700 Time 2hr.

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:  
County Multnomah Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 2N N or S, Range 2W E or W, WM.  
Section 14 SE 1/4 SW 1/4  
Tax Lot 4 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 17821 NW Skyline Blvd  
Portland, OR 97231

(10) STATIC WATER LEVEL:  
570 ft. below land surface. Date 03/26/90  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 626

From	To	Estimated Flow Rate	SWL
626	635	3 gpm	570
675	690	6 gpm	

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
Topsoil	0	1	
Soft brown clay	1	8	
Sticky light brown clay	8	14	
Sticky red-brown clay	14	47	
Sticky dark brown clay	47	62	
Soft decomp. brown basalt	62	87	
Soft light brown clay	87	107	
Sticky light red-brown clay	107	144	
Soft decomp red-brown basalt	144	180	
Dark brown clay	180	192	
Soft light brown clay	192	209	
Firm decomp light brown basalt	209	225	
Firm gray-brown basalt	225	239	
Firm decomp. gray basalt	239	248	
Firm gray-brown basalt	248	274	
Soft Brown Basalt	274	285	
Soft red-brown basalt	285	295	
Soft gray-brown basalt	295	372	
with firm interbeds			
Soft brown basalt	372	381	
Firm gray-brown basalt	381	402	
Hard gray basalt	402	453	
Firm gray-brown basalt	453	467	

Date started 03/21/90 Completed 03/28/90

(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 Dr. [Signature] WWC Number 1266  
Date 03/30/90

