

RECEIVED

Start Card - Maple Head  
STATE OF OREGON  
WATER WELL REPORT  
(as required by ORS 537.765)

JUL - 9 1986

WASA  
0150

1W/3W-16a

WATER RESOURCES DEPT

(1) OWNER: Owner's Name Glenn Walters Nursery  
Address Route 2, Box 389  
City Forest Grove, State Oregon Zip 97116

(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:  
Depth of Completed Well 1505 ft.  
Special Standards date of approval \_\_\_\_\_

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks	pounds
5"	0 885	Cement	885 885	35	sacks
		Cement	0 100	75	sacks
10"	885 1000	-	-	-	-

How was seal placed? Method  A  B  C  D  E  
 Other Bottom seal "A", Top seal "C"  
Backfill placed from 100 ft. to 835 ft. Material Hivisc. slurry  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. 90 sec/qt. visc.

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10"	+1	885	.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"/>

Location of shoe(s) 885'

(7) PERFORATIONS/SCREENS:

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"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Pumping level	Drill stem at	Time 1/2 hr
660	36'		
660	37'		1 hr
660	51'		24 hr.
660	55'		54 hr.

Temperature of water 68° - 69° 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 Wash. Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 1 N N or S, Range 3 W. E or W, WM.  
Section 16 NE 1/4 NE 1/4  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Roy Rd.

(10) STATIC WATER LEVEL:  
17 ft. below land surface. Date 7/4/86  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WELL LOG: Ground elevation 170

Material	From	To	WB?	SWL
Topsoil	0	1		
Firm brown clay	1	3		
Soft light brown silty clay	3	18		
Soft gray silty clay	18	53		
Sticky gray clay	53	122		
Sticky light brown clay	122	133		
Fine to coarse red-brown sand	133	142		
Sticky light brown clay	142	148		
Fine to coarse red-brn. sand	148	156		
Firm red-brown clay	156	158		
Soft gray silty clay	158	164		
Soft gray-brown sandy clay	164	222		
Sticky gray clay	222	264		
Soft gray-green sandy clay w/some coarse sand	264	270		
Sticky dark gray clay	270	281		
Soft blue-gray sandy clay w/some coarse sand	281	287		
Sticky dark gray clay	287	292		
Soft blue-gray clay	292	328		
Sticky gray-brown clay	328	394		
Fine to coarse brown sand	394	403		
Sticky brown clay	403	407		
Fine to coarse brown sand	407	418		
Sticky blue-gray clay	418	420		
Fine to coarse brown and black sand	420	427		
Sticky blue-gray clay	427	477		
Soft gray sandy clay w/coarse sand	477	502		

Date started 11/24/85 Completed 7/6/86

(unbonded) Water Well Constructor Certification:  
I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.  
Signed \_\_\_\_\_ Date \_\_\_\_\_

(bonded) Water Well Constructor Certification:  
I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.  
Signed [Signature] Date 7/7/86  
A. M. JANNSEN WELL DRILLING CO., INC.  
Company \_\_\_\_\_ Co. Job No. \_\_\_\_\_

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1h/3w-16aa

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

WATER RESOURCES DEPT SALEM, OREGON

(1) OWNER:

Name Glenn Walters Nursery Address City State Zip

(2) TYPE OF WORK:

Options: New Well, Deepen, Recondition, Abandon

(3) DRILL METHOD:

Options: Rotary Air, Rotary Mud, Cable, Other

(4) PROPOSED USE:

Options: Domestic, Community, Industrial, Irrigation, Thermal, Injection, Other

(5) BORE HOLE CONSTRUCTION:

Depth of Completed Well \_\_\_\_\_ ft.

Special Standards date of approval \_\_\_\_\_

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, 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

Location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Options: Perforations, Screens. Method, 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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Pumping level, Drill stem at, Time 1/2 hr, 1 hr

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

Options: Salty, Muddy, Odor, Colored, Other

Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:

County, Latitude, Longitude, Township, N or S, Range, E or W, WM, Section, Tax Lot, Lot, Block, Subdivision, Street Address of Well

(10) STATIC WATER LEVEL:

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

(11) WELL LOG:

Table with columns: Material, From, To, WB?, SWL. Contains detailed well log entries.

Date started \_\_\_\_\_ Completed \_\_\_\_\_

(unbonded) Water Well Constructor Certification:

I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed \_\_\_\_\_ Date \_\_\_\_\_

(bonded) Water Well Constructor Certification:

I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed \_\_\_\_\_ Date \_\_\_\_\_

Company \_\_\_\_\_ Co. Job No. \_\_\_\_\_

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1N/3W-16aa

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

WATER RESOURCES DEPT

SALEM, OREGON

(1) OWNER: Glenn Walters Nursery Page 3

(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: Depth of Completed Well, Special Standards date of approval

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

How was seal placed? Method A, B, C, D, E. Backfill placed from, Gravel placed from

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Perforations, Screens

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

Temperature of water, Depth Artesian Flow Found, Was a water analysis done?

(9) LOCATION OF WELL by legal description: County, Latitude, Longitude, Township, Section, Tax Lot, Block, Subdivision

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

(11) WELL LOG: Ground elevation

Table with columns: Material, From, To, WB?, SWL. Rows include Gray-black lava, Gray basalt, Red, black-brown basalt, etc.

Date started, Completed

(unbonded) Water Well Constructor Certification: I constructed this well in compliance with Oregon well construction standards.

Signed, Date

(bonded) Water Well Constructor Certification: I accept responsibility for construction of this well and its compliance with all Oregon water well standards.

Signed, Date

Company, Co. Job No.