

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

(WELL I.D.) # **L 92429**  
(START CARD) # **197204**

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number **4914**

Name **William Sabol**  
Address **P.O. Box 204**  
City **St. Paul** State **Oregon** Zip **97137**

(2) TYPE OF WORK

New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:

Rotary Air  Rotary Mud  Cable  Auger  
 Other

(4) PROPOSED USE:

Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval  Yes  No Depth of Completed Well **60** ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
16	0	60	Bentonite	0	18	30 sacks

How was seal placed: Method  A  B  C  D  E

Other **Poured dry**

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	Steel	Plastic	Welded	Threaded
Casing	12"	+1	60	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 **Torch cut**

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
19	60	7/16x10	400			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Draw down	Drill stem at	Time
600	All	55	1 hr.

Temperature of water **54** 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 **Linn** Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township **10** S Range **3** W WM.  
Section **4** NE 1/4 **SE** 1/4  
Tax Lot **1600** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) **Dever Conner Rd, Albany, OR 97321**

(10) STATIC WATER LEVEL:

**13** ft. below land surface. Date **12/10/2007**  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found **19**

From	To	Estimated Flow Rate	SWL
19	46	800+	13

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(12) WELL LOG:

Material	Ground Elevation	
	From	To
Sandy loam	0	14
Cemented gravel	14	19
Sand & gravel	19	46
Cemented gravel	46	50
Blue clay	50	60

Hole caved in around casing from 60 to 18

**JONES DRILLING CO., INC.**  
29400 SANTIAM HWY.  
LEBANON, OR 97355  
541-367-2560 541-451-2686  
1-800-915-8388

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WATER RESOURCES DEPT  
SALEM, OREGON

Date started **12/07/2007** Completed **12/10/2007**

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Signed *KAD* WWC Number **1411** Date **12/13/2007**

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed *Butz* WWC Number **1684** Date **12/13/2007**

1011600

STATE OF OREGON WATER SUPPLY WELL REPORT

(WELL I.D.)# 1. 92428

(START CARD) # 197203

Instructions for completing this report are on the last page of this form.

(1) OWNER: William Sabol, Well Number 4913, Address P.O. Box 404, City St. Paul, State Oregon, Zip 97137

(2) TYPE OF WORK: New Well

(3) DRILL METHOD: Rotary Air

(4) PROPOSED USE: Irrigation

(5) BORE HOLE CONSTRUCTION: Depth of Completed Well 60 ft

Table with columns: Diameter, From, To, Material, From, To, Sacks or pounds. Row 1: 16, 0, 60, Bentonite, 0, 16, 24 sacks

How was seal placed: Poured dry

Backfill placed from 0 ft to 60 ft, Material Bentonite

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Row 1: 12, +1, 59, 250, checked, checked

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Casing, Liner. Row 1: 19, 59, 7/16x10, 400, checked

(8) WELL TESTS: Minimum testing time is 1 hour. Pump 500, Bailer All, Air 60, Time 1 hr.

Temperature of water 54, WWC Number 1411, Date 12/12/2007

(9) LOCATION OF WELL by legal description: County Linn, Township 10 S, Range 3 W, Section 4 SE, 1/4 SE, 1/4, Tax Lot 1600, Block, Subdivision, Street Address of Well (or nearest address) Dever Conner Rd., Albany, OR 97321

(10) STATIC WATER LEVEL: 14 ft. below land surface, Date 12/03/2007

(11) WATER BEARING ZONES: Depth at which water was first found 18

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 18, 44, 700, 14

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Rows: Sandy loam (0-10), Cemented gravel (10-18), Gravel & sand (18-40), Cemented gravel (40-46), Blue clay (46-60), Hole caved around casing from (60-18)

JONES DRILLING CO., INC. 29400 SANTIAM HWY. LEBANON, OR 97355 541-367-2560 541-451-2686 1-800-915-8388

Date started 11/30/2007, Completed 12/03/2007

(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 water supply well construction standards. Signed [Signature] WWC Number 1411, Date 12/12/2007

(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. Signed [Signature] WWC Number 1684, Date 12/12/2007

1011600

STATE ENGINEER  
Salem, Oregon

LINN  
4494

POA #1  
Well Record

STATE WELL NO. 10/3W-4R(1)  
COUNTY Linn  
APPLICATION NO. GR-325

OWNER: Charles & Doris Grizzel

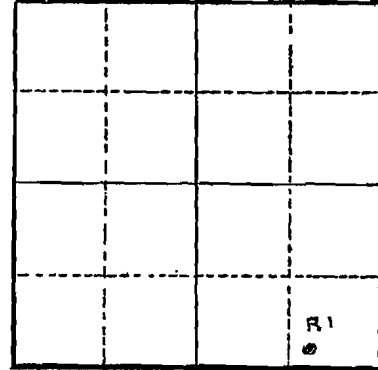
MAILING ADDRESS: Rt. 2, Box 383

LOCATION OF WELL: Owner's No. 1

CITY AND STATE: Albany, Oregon

SE 1/4 SE 1/4 Sec. 4 T. 10 S., R. 3 W., W.M.

Bearing and distance from section or subdivision  
corner N. 84° W. 19.50 chs. from SE cor. Sec. 4



Section 4

Altitude at well 200 ft. Interpolated

TYPE OF WELL: drilled Date Constructed 4/10/45

Depth drilled 27 ft. Depth cased 27 ft.

CASING RECORD: 8 - inch steel casing set from 0 to 27 ft.

FINISH: Slit perforations from 15 to 27 ft.

AQUIFERS: unknown

WATER LEVEL:

PUMPING EQUIPMENT: Type Allis Chalmers 2" centrifugal H.P. 10  
Capacity 200 G.P.M.

WELL TESTS:

Drawdown 2 ft. after \_\_\_\_\_ hours pumping 200 G.P.M.

Drawdown \_\_\_\_\_ ft. after \_\_\_\_\_ hours \_\_\_\_\_ G.P.M.

USE OF WATER irrigation 17.5 acres Temp. \_\_\_\_\_ °F., 19

SOURCE OF INFORMATION Reg. St. GR-325

DRILLER or DIGGER \_\_\_\_\_

ADDITIONAL DATA:

Log \_\_\_\_\_ Water Level Measurements \_\_\_\_\_ Chemical Analysis \_\_\_\_\_ Aquifer Test \_\_\_\_\_

REMARKS:

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