



State of Oregon
 Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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Check all items included with this application. (N/A = Not Applicable)

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- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist. SALEM, OR
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Permits to be Amended: **Number of permits to be amended: 1** List them here: **G-14063**
 Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <http://www.oregon.gov/owrd/pubs/docs/forms>). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form is not required if any of the following apply:
 - Water is to be diverted, conveyed, and/or used only on federal lands.
 - All of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
 - The proposed changes are all located on the property reviewed in Land Use form enclosed in Water Right Application Folder # _____.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

___ Application fee not enclosed/insufficient	___ Map not included or incomplete
___ Land Use Form not enclosed or incomplete	___ Assignment Form and fee not enclosed/insufficient
___ Additional signature(s) required	Part ___ is incomplete

Other/Explanation _____

Staff: _____ 503-986-0 _____ Date: ___/___/___

Part 2 of 5 – Permit Amendment Map Checklist

Your permit amendment application will be returned if any of the map requirements listed below are not met.

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

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- N/A If **more than three** permits are involved, separate maps for each permit.
- ✓ Permanent quality printed with dark ink on good quality paper.
- ✓ The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- ✓ A north arrow, a legend, and scale.
- ✓ The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- ✓ Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- ✓ Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- ✓ Existing place of use that includes separate hachuring for each water use permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
- N/A If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- ✓ Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water use permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,160
2	Types of change proposed: <input type="checkbox"/> Place of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = 1 (2a) Subtract 1 from the number in line 2a = 0 (2b) <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » » » »	2	\$0
3	Number of permits included in Permit Amendment _____ (3a) Subtract 1 from the number in 3a: _____ (3b) <i>If only one permit this will be 0</i> Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » » » »	3	
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » <input checked="" type="checkbox"/> Yes: enter \$410 »	4	\$410
5	Do you propose to change the place of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 » <input type="checkbox"/> Yes: enter the cfs for the portions of the permits to be amended (see example below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$350, then enter on line 5 » » » » » » » » » »	5	
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	
7	Is this permit amendment: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » » » »	7	\$0
8	Subtract line 7 from line 6 » » » » » » » » » » Permit Amendment Fee:	8	\$1570

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*Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:

- For irrigation calculate cfs for each permit involved as follows:
 - Divide total authorized cfs by total acres in the permit (*for S-12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be changed to get the application cfs (*x 45 ac = 0.56 cfs*).
 - If the water right permit does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (*For S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
- Add cfs for the portions of permits on all the land included in the application; however **do not count cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land.** The fee should be assessed only once for each “on the ground” acre included in the application. (*In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0.*)

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Roger and Susan Ruckert			PHONE NO. 541-740-7821	ADDITIONAL CONTACT NO.
ADDRESS 33776 Ridge Drive				FAX NO.
CITY Tangent	STATE OR	ZIP 97389	E-MAIL rsajjel@juno.com	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this permit amendment; and why:

1. Add an additional Point of Appropriation, Well #3. The existing Well #1 is not capable of providing the full duty of water, and Well #2 produces very little, both having been deepened
2. Correct the reported location of Wells #1 and #2.

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

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Is the applicant the permit holder of record? Yes No

If NO, include either:

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- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

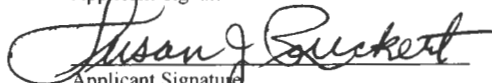
I understand that prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: _____.

I (we) affirm that the information contained in this application is true and accurate.


Applicant Signature

Roger A. Ruckert
Print Name (and Title if applicable)

11-26-17
Date


Applicant Signature

Susan Ruckert
Print Name (and Title if applicable)

11-26-17
Date

Check one of the following:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.

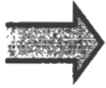
Check the appropriate box, if applicable:

- Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

- Check here if water for any of the permits supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME Linn County	ADDRESS PO Box 100	
CITY Albany	STATE OR	ZIP 97321

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please **save the application form to your computer**. Unlock the document by using one of the following instructions for your Microsoft Word software version:

Microsoft Word 2003

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;

OR

- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the **Tools** menu => click **Protect Document**;

OR

- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

Microsoft Word 2007

- Unlock the document by clicking the **Review** tab, then click **Protect Document**, then click **Stop Protect**

- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

Microsoft Word 2010

- Unlock the document by clicking the **Review** tab, toggle the **Restrict Editing** icon at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the “**Allow only this type of editing in the document: Filling in forms**” in the “Editing restrictions” section on the right-hand list of options.

- To relock the document, check the **Editing Restrictions/Allow Only This Type of Editing/Filling In Forms** box from the drop-down menu, then check **Yes, Start Enforcing Protection**. You do not need to assign a password for the editing restrictions.

Other Alternatives:

- Photocopy pages or tables in Part 5, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

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Part 5 of 5 – Water Use Permit Information

Please use a separate Part 5 for each permit being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

PERMIT # G-14063

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)
 (Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	L-119455	1 2 S	0 3 W	27	NE NW	100	3071 ft west & 50 ft south of NE corner, Sec 27
Well #1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L-119455	1 2 S	0 3 W	27	NE NW	100	3100 ft West & 55 ft South of NE corner, Sec 27
Well #2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	L-49894	1 2 S	0 3 W	27	NW NE	100	2170 ft West & 45 ft South of NE corner, Sec 27
Well #2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L-49894	1 2 S	0 3 W	27	NW NE	100	1960 ft West & 50 ft South of NE corner, Sec 27
Well #3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	L-119456	1 2 S	0 3 W	27	NE NW	100	3365 ft West & 120 ft South of NE corner, Sec 27
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- | | |
|---|--|
| <input type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Surface water POD to Ground Water POA (SW/GW) |

Will all of the proposed changes affect the entire water use permit?

- Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the permit to be changed.

For a change in place of use:

Does the permit holder of record own or control the land TO which the place of use is being moved?
 Yes No

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If NO, the landowner of the land TO which the place of use is being **moved must be assigned to the permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? Yes No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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Please use and attach additional pages of Table 2 as needed.
See page 6 for instructions.

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer Staff.

Table 2. Description of Changes to Water Use Permit # G-14063

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.										Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.							
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date
EXAMPLE																		
2	S	9	E 15 NE NW	100		15.0	POD #1 POD #2		POU/POD	2	S	9	E 15 NW NW	100	1	10.0	POD #5	
"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	E 15 SW NW	200		5.0	POD #6	
									APOD/POD	12	S	3	W 27 NE NE	100		40	3 WELLS	1/12/2001
									APOD/POD	12	S	3	W 27 SE NE	100		40	3 WELLS	1/12/2001
									APOD/POD	12	S	3	W 27 SW NE	100		40	3 WELLS	1/12/2001
									APOD/POD	12	S	3	W 27 NW NE	100		40	3 WELLS	1/12/2001
									APOD/POD	12	S	3	W 27 NE NW	100		10	3 WELLS	1/12/2001
									APOD/POD	12	S	3	W 27 SE NW	100		20	3 WELLS	1/12/2001
TOTAL ACRES										TOTAL ACRES								190


Additional remarks: **No changes to POU.**

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Are there other water rights certificates, water use permits or ground water registrations associated with the "from" or "to" lands? Yes No

If YES, list the other certificate, permit, or ground water registration numbers: _____

 If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

- Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (Tip: You may search for well logs on the Department's web page at: http://apps2.wrd.state.or.us/apps/gw/well_log/Default.aspx)

AND/OR

- Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-_____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right

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STATE OF OREGON - FEB 07 2001
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

(START CARD) # _____

Instructions for completing this report are on the back of this form.
WATER RESOURCES DEPT.
SALEM, OREGON

(1) OWNER: Well Number _____

Name Roger Ruchert
Address 33776 Ridge Dr
City Tangent State OR Zip 97738

(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 110 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
14"	0 18'	cement	0 18'	8	sacks
10"	18' 110'				

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10"	+15'	107'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		09"		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 107' 09"

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
96' 06"	107'	378	80	10"		<input checked="" type="checkbox"/>	<input type="checkbox"/>
		x12"				<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
100 gpm	32'		1 hr.

Temperature of water 52 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 12 S N or S Range 3 W E or W. WM.
Section 27 1/4 _____ 1/4 _____
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) same as above

(10) STATIC WATER LEVEL:
10' ft. below land surface. Date 7-10-87
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 34'

From	To	Estimated Flow Rate	SWL
34'	38'		
72'	110'	100 gpm	10'

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Top soil	0	3	
Brown clay	3	13	
Brown clay & gravel	13	22	
Brown clay	22	26	
Gray clay & gravel	26	34	
Dirty brown sand & gravel	34	38	
Brown clay	38	41	
Blue clay	41	50	
Black sandy clay	50	58	
Firm black clay	58	63	
Blue clay	63	72	10'
Gray sandy clay & gravel	72	94	
Black silty clay	94	105	
Black sand	105	107	
Black silty clay	107	110	

Date started 7-10-87 Completed 7-17-87

(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.
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 water supply well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 1378
Signed [Signature] Date 7-23-87

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

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

LIN LINN

53597
 JUL 31 1987

WELL #1
 1.2 SW - 127

WATER RESOURCES DEPT

(1) OWNER: Well Number: _____

Name Roger Ruckert
 Address 33776 Rigde Dr.
 City Tangent State OR Zip 97389

(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:

Construction approval Yes No Depth of Completed Well 110 ft.

Explosives used Yes No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
4"	0	18'	cement	0	18'	8 sacks
10"	18'	110'				

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:

Diameter	From	To	Gauge	SEAL			
				Steel	Plastic	Welded	Threaded
Casing: 10"	+15"	107'	.250	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		09"		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 107'09"

PERFORATIONS/SCREENS:

Perforations Method Acetylene touch

Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
106"	107'	3/8	80	10"		<input type="checkbox"/>	<input type="checkbox"/>
		x12"				<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
100gpm	32'		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

Salty Muddy Odor Colored Other _____

Depth of strata: _____

(9) LOCAL OREGON WELL by legal description:

County Linn Latitude _____ Longitude _____
 Township 12 S N or S, Range 3 W E or W, WM.
 Section 27 1/4 _____ 1/4 _____
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) same as above

(10) STATIC WATER LEVEL:

10' ft. below land surface. Date 7-10-87
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 34'

From	To	Estimated Flow Rate	SWL
34'	38'		
72'	110'	100 gpm	10'

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Top soil	0	3	
Brown clay	3	13	
Brown clay & gravel	13	22	
Brown clay	22	26	
Gray clay & gravel	26	34	
Dirty brn. sand & gravel	34	38	
Brown clay	38	41	
Blue clay	41	50	
Black sandy clay	50	58	
Firm black clay	58	63	
Blue clay	63	72	
Gray sandy clay & gravel	72	94	
Black silty clay	94	105	
Black sand	105	107	
Black silty clay	107	110	

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NOV 29 2017

SALEM, OR

Date started 7-10-87 Completed 7-17-87

(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 [Signature] WWC Number 1378 Date 7-23-87

LINN 61447

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

WELL I.D. LABEL# L119455 START CARD # 1028198 ORIGINAL LOG # LINN 53597 2017

SALEM, OR

(1) LAND OWNER Owner Well I.D. 5579 First Name Roger Last Name Ruckert Company Address 33776 Ridge Dr. City Tangent State OR Zip 97389

(2) TYPE OF WORK [] New Well [X] Deepening [] Conversion [] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION Casing: Dia + From To Gauge Std Plstc Wld Thrd Seal: Material From To Amt sacks/lbs

(3) DRILL METHOD [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud [] Reverse Rotary [] Other

(4) PROPOSED USE [] Domestic [X] Irrigation [] Community [] Industrial/ Commercial [] Livestock [] Dewatering [] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy) Depth of Completed Well 180 ft. BORE HOLE Dia From To Material From To Amt sacks/lbs

How was seal placed: Method [] A [] B [] C [] D [] E [] Other Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material Size Explosives used: [] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER Casing Liner Dia + From To Gauge Std Plstc Wld Thrd Shoe [] Inside [] Outside [] Other Location of shoe(s) Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Perfs Casing/Screen Scm/slot Slot # of Tele/ green Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) Temperature 52 F Lab analysis [] Yes By Water quality concerns? [] Yes (describe below) TDS amount 164 From To Description Amount Units

(9) LOCATION OF WELL (legal description) County LINN Twp 12 S N/S Range 3 W E/W WM Sec 27 NW 1/4 of the NE 1/4 Tax Lot 100 Tax Map Number Lot Lat Long [X] Street address of well [] Nearest address 33776 Ridge Dr., Tangent, OR 97389

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Pre-Alteration Completed Well 09-16-2015 28 Flowing Artesian? [] Dry Hole? [] WATER BEARING ZONES Depth water was first found 110 SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG Ground Elevation Material From To Previously drilled 0 110 Blue sandy & gravel 110 114 Gray clay 114 114 Black sand 114 120 Gray clay with black sand strips 120 180

Date Started 09-16-2015 Completed 09-16-2015 (unbonded) Water Well Constructor Certification I certify that the work I performed on the construction, deepening, 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. License Number 1888 Date 09-21-2015 Signed

(bonded) Water Well Constructor Certification I accept responsibility for the construction, deepening, 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. License Number 1884 Date 09-22-2015 Signed Contact Info (optional) jonesdrilling@hotmail.com

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JONES DRILLING CO., INC. 29400 SANTIAM HWY. SEP 28 2015 LEBANON, OR 97355 541-367-2560 541-451-2686 1-800-915-8388 SALEM, OR

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T 12778

SALEM, OR

RECEIVED LINN 54637

Well # 2

STATE OF OREGON WATER SUPPLY WELL REPORT NOV 05 2001

WELL I.D. # L 49894 START CARD # 141665

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

WATER RESOURCES DEPT SALEM, OREGON

(1) LAND OWNER Name Roger Ruckert Address 33776 Ridge Rd City Tangent State OR Zip 97389

(9) LOCATION OF WELL by legal description: County Linn Latitude Longitude Township 12 S N or S Range 3W E or W. WM Section 27 NW 1/4 NE 1/4 Tax Lot 100 Lot Block Subdivision Street Address of Well (or nearest address) same

(2) TYPE OF WORK [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

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

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 135 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Row 1: 14", 0, 30, cement, 0, 30, 17sacks. Row 2: 10", 30, 135.

How was seal placed: Method [] A [] B [X] 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: 10" 1' 3" 106' 09" 250 Liner: Drive Shoe used [] Inside [X] Outside [] None Final location of shoe(s) 106' 09"

(7) PERFORATIONS/SCREENS: [X] Perforations Method Acetylene torch [] Screens Type Material From To Slot size Number Diameter Tele/pipe size Casing Liner 93' 104' 3/8 88 10" 109' 09" x12

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [X] Bailer [] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem at Time 80gpm 37' 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

(10) STATIC WATER LEVEL: 17' ft. below land surface. Date 10-26-01 Artesian pressure lb. per square inch Date

(11) WATER BEARING ZONES: Depth at which water was first found 34'. Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 34', 38', 5gpm, 13'. Row 2: 101', 103', 80gpm, 17'.

(12) WELL LOG: Ground Elevation. Table with columns: Material, From, To, SWL. Rows include Top soil, Brown clay, Brown clay & some gravel, Dirty gravel, Brown clay, Brown clay & gravel, Firm dark gray clay, Brown clay & gravel, Dark gray firm, Black sand, Black sand & gravel, Light blue clay, Light green soft shale.

Date started 10-9-01 Completed 10-26-01 (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. 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 water supply well construction standards. This report is true to the best of my knowledge and belief. WWC Number 1378 Signed Date 10-31-01

RECEIVED BY OWRD NOV 29 2001 SALEM, OR

WELL #2

LINN 61449

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL I.D. LABEL#	49894
START CARD #	1028202
ORIGINAL LOG #	LINN 54637

(1) LAND OWNER Owner Well I.D. 5580
 First Name Roger Last Name Ruckert
 Company _____
 Address 33776 Ridge Rd.
 City Tangent State OR Zip 97389

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
 Dia + From To Gauge Stl Plstc Wld Thrd
 Casing: _____
 Material From To Amt sacks/lbs
 Seal: _____

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 180 ft.
BORE HOLE SEAL
 Dia From To Material From To Amt sacks/lbs

8	135	180	Undisturbed				
						Calculated	
						Calculated	

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
 Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd

<input checked="" type="checkbox"/>	<input type="checkbox"/>	6		0	1	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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 Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS Perforations Method Hot air perforator
 Screens Type _____ Material _____

Perf/S	Casing/Screen	Scm/slot	Slot	# of	Tele/		
screen	Liner	width	length	slots	pipe size		
Perf	Casing	10	30	110	.375	1	5,000

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 80 Drawdown _____ Drill stem/Pump depth _____ Duration (hr) 1
 Temperature 53 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 160

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
 County LINN Twp 12 S N/S Range 3 W E/W WM
 Sec 27 NW 1/4 of the NE 1/4 Tax Lot 100
 Tax Map Number _____ Lot _____
 Lat _____ or _____ DMS or DD
 Long _____ or _____ DMS or DD
 Street address of well Nearest address
33776 Ridge Rd., Tangent, OR 97389

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	07-17-2015		17

 Flowing Artesian? Dry Hole?
 WATER BEARING ZONES Depth water was first found original

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
09-17-2015	100	115	80		17

(11) WELL LOG Ground Elevation _____

Material	From	To
Green claystone	135	140
Gray sandstone	140	180
No new water. Re-perforate well. No change.		
Cut off bent casing & weld on new piece		

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JONES DRILLING CO., INC. SEP 28 2015
29400 SANTIAM HWY.
LEBANON, OR 97355 SALEM, OR
541-367-2560 541-451-2686
1-800-915-8388

Date Started 09-17-2015 Completed 09-17-2015
(unbonded) Water Well Constructor Certification
 I certify that the work I performed on the construction, deepening, 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.
 License Number 1888 Date 09-23-2015
 Signed _____

(bonded) Water Well Constructor Certification
 I accept responsibility for the construction, deepening, 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.
 License Number 1684 Date 09-23-2015
 Signed _____
 Contact Info (optional) jonesdrilling@hotmail.com **RECEIVED BY OWRD**

STATE OF OREGON

DRAFT

(as required by ORS 537.765 & OAR 690-205-0210)

NOV 29 2017

WELL I.D. LABEL# L 119456
 START CARD # 1028218
 ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. 5581
 First Name Roger Last Name Ruckert
 Company SALEM, OR
 Address 33776 Ridge Dr.
 City Tangent State OR Zip 97389

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
 Dia + From To Gauge Stl Plstc Wld Thrd
 Casing:
 Material From To Amt sacks/lbs
 Seal:

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 325 ft.

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	
16	0	19	Bentonite	0	19	15 S
10	19	119				Calculated 12
8	119	325				Calculated

How was seal placed. Method A B C D E
 Other Poured dry
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft to _____ ft. Material _____ Size _____
 Explosives used Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
 Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd

<input checked="" type="checkbox"/>	<input type="checkbox"/>	10	<input checked="" type="checkbox"/>	1	119	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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 Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia 16 From 0 To 19

(7) PERFORATIONS/SCREENS
 Perforations Method Holte air perforator
 Screens Type _____ Material _____

Perf/Screen	Casing/Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/pipe size
Perf	Casing	10	72	115	.375		3,000	

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
500		100	1

Temperature 53 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 223
 From To Description Amount Units

(9) LOCATION OF WELL (legal description)
 County LINN Twp 12 S N/S Range 3 W E/W WM
 Sec 27 NW 1/4 of the NE 1/4 Tax Lot 100
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

33776 Ridge Dr. - Tangent, OR 97389

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL (psi)	+ SWL (ft)
Completed Well	09-22-2015		20

 Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 30

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
09-22-2015	30	35	10		20
09-22-2015	55	70	10		20
09-22-2015	72	110	300		20
09-22-2015	135	300	200		20

(11) WELL LOG Ground Elevation _____

Material	From	To
Topsoil	0	2
Brown clay	2	13
Brown clay w/gravel	13	20
Blue clay	20	30
Cemented sand & gravel	30	35
Brown clay	35	55
Dirty brown sand & gravel	55	60
Cemented sand & gravel	60	70
Blue clay	70	72
Cemented sand & gravel	72	95
Black sand & gravel	75	110
Cemented sand & gravel	110	135
Black sand	135	140
Brown clay black sand	140	155
Gray clay with blue sand	155	180
Blue clay	180	190
Black sand	190	200
Gray clay with strips sand	200	210
Blue clay	210	260

Date Started 09-18-2015 Completed 09-22-2015

(unbonded) Water Well Constructor Certification
 I certify that the work I performed on the construction, deepening, 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.
 License Number 1888 Date 09-22-2015
 Signed _____

(bonded) Water Well Constructor Certification
 I accept responsibility for the construction, deepening, 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.
 License Number 1684 Date 09-24-2015
 Signed _____
 Contact Info (optional) jonesdrilling@hotmail.com

LINN 61451

Well #3 LINN 61451

WATER SUPPLY WELL REPORT - continuation page

WELL I.D. LABEL# I	119456
START CARD #	1028218
ORIGINAL LOG #	

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Std	Plstc	Wld	Thrd
○				○	○	○	○	○

Material	From	To	Amt	sacks/lbs

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	Amt
						Calculated
						Calculated
						Calculated
						Calculated

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Std	Plstc	Wld	Thrd
○	○						○	○	○	○
○	○						○	○	○	○
○	○						○	○	○	○
○	○						○	○	○	○
○	○						○	○	○	○

(7) PERFORATIONS/SCREENS

Perf/Screen	Casing/Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/pipe size

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(11) WELL LOG

Material	From	To
Gray sand	260	290
Gray sand with small gravel	290	325
Hole bridged at 134'		
RECEIVED BY OWRD		
SEP 28 2015		
SALEM, OR		
RECEIVED BY OWRD		
NOV 29 2017		
SALEM, OR		

Comments/Remarks