

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

Well ID L08930

(START CARD) # 94626

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

(1) OWNER: Well Number 1  
 Name Eugene Christian Fellowship  
 Address 89780 N. Game Farm Rd.  
 City Eugene State OR Zip 97408

(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 138 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12"	0	19	cement	0	19	24 sacks
8"	19	138				

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: 8"	+2	138	.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) 138'

(7) PERFORATIONS/SCREENS:

Perforations Method Holte perforator  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
100	138	1/2" x 1"	1520	8"		<input checked="" 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
120	113	138	1 hr.

Temperature of water 55 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: 10883

(9) LOCATION OF WELL by legal description:  
 County Lane Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 17S N or S Range 3W E or W. WM. \_\_\_\_\_  
 Section 9 SW 1/4 SE 1/4 \_\_\_\_\_  
 Tax Lot 2802 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) same

(10) STATIC WATER LEVEL:  
25 ft. below land surface. Date 4-18-97  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 99'

From	To	Estimated Flow Rate	SWL
99	138	120	25

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

Material	From	To	SWL
top soil	0	2	
brown clay	2	9	
sand & gravel	9	138	25

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WATER RESOURCES DEPT  
 SALEM, OREGON

Date started 4-17-97 Completed 4-18-97

(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 [Signature] WWC Number 1617 Date 4-18-97

(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 [Signature] WWC Number 1541 Date 4-18-97

#2

11143

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

WATER WELL REPORT

STATE ENGINEER, SALEM, OREGON within 30 days from the date of well completion

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STATE OF OREGON (Please type or print) (Do not write above this line)

State Well No. 17/3W-16 State Permit No. LANE 11143

STATE ENGINEER SALEM, OREGON

(1) OWNER:

Name ROY TUCKER Address 117 ALLEN AVENUE - SPRINGFIELD, OREGON

(2) TYPE OF WORK (check):

New Well [X] Deepening [ ] Reconditioning [ ] Abandon [ ] If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary [ ] Driven [ ] Cable [X] Jetted [ ] Dug [ ] Bored [ ]

(4) PROPOSED USE (check):

Domestic [X] Industrial [ ] Municipal [ ] Irrigation [ ] Test Well [ ] Other [ ]

CASING INSTALLED:

6" Diam. from 0 ft. to 65 ft. Gage .250 Threaded [ ] Welded [X]

PERFORATIONS:

Perforated? [ ] Yes [X] No. Type of perforator used Size of perforations in. by in. perforations from ft. to ft.

(7) SCREENS:

Well screen installed? [ ] Yes [X] No Manufacturer's Name Type Model No. Diam. Slot size Set from ft. to ft.

(8) WATER LEVEL: Completed well.

Static level 18 ft. below land surface Date 12-23-69 Artesian pressure lbs. per square inch Date

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level Was a pump test made? [ ] Yes [X] No If yes, by whom? Yield: gal./min. with ft. drawdown after hrs.

Ball test 28 gal./min. with 28 ft. drawdown after 2 hrs. Artesian flow g.p.m. Date

Temperature of water 50° Was a chemical analysis made? [ ] Yes [X] No

(10) CONSTRUCTION:

Well seal—Material used BENTONITE Depth of seal 26 ft. Diameter of well bore to bottom of seal 6 in. Were any loose strata cemented off? [ ] Yes [X] No Depth Was a drive shoe used? [X] Yes [ ] No Did any strata contain unusable water? [ ] Yes [X] No Type of water? depth of strata Method of sealing strata off Was well gravel packed? [ ] Yes [X] No Size of gravel: Gravel placed from ft. to ft.

(11) LOCATION OF WELL:

County LANE Driller's well number 9 1/4 Section 16 T. 17 R. 3 W.M. Bearing and distance from section or subdivision corner

(12) WELL LOG:

Diameter of well below casing -0- Depth drilled 63 ft. Depth of completed well 63 ft. Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level as drilling proceeds. Note drilling rates.

Table with columns: MATERIAL, From, To, SWL. Rows: TOP SOIL (0-4), CLAY & GRAVEL (4-32), FINE SAND & GRAVEL (32-60), SAND & GRAVEL (60-63) 18

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Work started 12-18-69 19 Completed 12-23-69 19 Date well drilling machine moved off of well 12-23-69 19

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Clifford Cronin Date 12-29-69 19 (Drilling Machine Operator)

Drilling Machine Operator's License No. 148

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME CARTER'S DRILLING & PUMP SERVICE (Person, firm or corporation) (Type or print)

Address 325 So. 2ND ST. SPRINGFIELD, OREGON

[Signed] James J. Carter (Water Well Contractor)

Contractor's License No. 126 Date 12-29-69 19

10833



Oregon Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem Oregon 97301  
 (503) 986-0900  
 www.wrd.state.or.us

# Application for Well ID Number

*Do not complete if the well already has a Well I.D. Number.*

**\* I. OWNER INFORMATION**

Current Owner Name (please print): Eugene Christian Fellowship  
 Mailing Address: 89780 N. Game Farm Road  
 City: Eugene State: Or Zip: 97408  
 Mailing Address (to send Well I.D.): Same  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**II. WELL INFORMATION** (Do not complete this section if the well report is attached.)

Township: 17 (~~North~~/South) Range: 3 (~~East~~/West) Section: 9 (Note: Original 16)  
 Tax Lot: 2802 County: LANE SW 1/4 SE 1/4  
 Street Address of Well: 89780 N. Game Farm Road City: Eugene  
 Owner at time the well was constructed, (if known): Roy Tucker  
 If the property had a different street address in the past: Not KNOWN

**III. GENERAL WELL INFORMATION** (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): \_\_\_\_\_  
 Date Well Constructed: \_\_\_\_\_ Total Well Depth: \_\_\_\_\_ Casing Diameter: \_\_\_\_\_  
 Other Information: \_\_\_\_\_

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**\* SUBMITTED BY** (please print): Mark Harpham  
 PHONE: 541-344-3380 FAX: \_\_\_\_\_

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**WATER RESOURCES DEPT  
 SALEM, OREGON**

**\* Send application to Oregon Water Resources Department, 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.**

<i>For Official Use Only by the Oregon Water Resources Department:</i>		
Received Date:	Well Log Number:	Well Identification #:
_____	_____	_____