

WATER WELL REPORT
STATE OF OREGON

Lake 16891

RECEIVED RECEIVED

JUL 17 1984

MAY 23 1984

State Well No. *345/18E-356*

WATER RESOURCES DEPARTMENT
SALEM, OREGON

State Permit No. *drilled*

1) OWNER:

Name *Robert L. Stockhoff*
Address *37990 Gulley RD*
City *SC 10* State *OR*

(2) TYPE OF WORK (check):

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

(3) TYPE OF WELL:

Rotary Air Driven Domestic Industrial Municipal
Rotary Mud Dug Irrigation Test Well Other
 Bored Thermal Withdrawal Reinjection

(4) PROPOSED USE (check):

(5) CASING INSTALLED: Steel Plastic
Threaded Welded
"Diam. from *14* ft. to *19* ft. Gauge *8.5*

LINER INSTALLED:

"Diam. from ft. to ft. Gauge

(6) PERFORATIONS:

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

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name
Type Model No.
Diam. Slot Size Set from ft. to ft.
Diam. Slot Size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
Id: gal./min. with ft. drawdown after hrs.
Air test gal./min. with drill stem at ft. hrs.
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water Depth artesian flow encountered

(9) CONSTRUCTION:

Special standards: Yes No
Well seal—Material used *Cement*
Well sealed from land surface to ft.
Diameter of well bore to bottom of seal *19* in.
Diameter of well bore below seal *14* in.
Number of sacks of cement used in well seal *10* sacks
How was cement grout placed? *Cement mixed & pressured grout*
Was pump installed? *No* Type HP Depth ft.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of Water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel:
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County *LAKE* Driller's well number
NW 1/4 Section *35* T. *34* R. *18E* W.M.
Tax Lot # Lot Blk Subdivision

Address at well location: *2 1/2 miles NE of Christmas Valley*

(11) WATER LEVEL: Completed well.

Depth at which water was first found *Don't remember lower tube* ft.
Static level *not from first part* below land surface. Date
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing *14*
Depth drilled *280* ft. Depth of completed well *280* 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 and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
<i>2nd of BROWN</i>	<i>0</i>	<i>4</i>	
<i>GRAY LAVA ROCK</i>	<i>4</i>	<i>19</i>	
<i>BROWN CINDER</i>	<i>19</i>	<i>26</i>	
<i>BROWN LAVA ROCK</i>	<i>26</i>	<i>140</i>	

No cutting come out from 70 ft down on down to 280 ft. I want in the other well log telling you about the well log about the cutting I just left the casing and drilled to half fluid 14 in. pipe for 140 ft. already I got it.

RECEIVED

MAR 22 2018

WATER RESOURCES DEPT
SALEM, OREGON

Work started *4/19* 19 *84* Completed *4/26* 19 *84*
Date well drilling machine moved off of well *4/26* 19 *84*

(unbonded) Water Well Constructor Certification (if applicable):
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
(Signed) *Mel Search* Date *5/16* 19 *84*

Bonded Water Well Constructor Certification:
Bond *VI 41308* Issued by: *NW BONDING CO*
(number) (Type of print) (Surety Company Name)
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name *MEL SEARCH WELL DRILLING*
(Person, firm or corporation) (Type of print)
Address *7000 S. Gallatin Hwy. LEBANON, OR*
(Signed) *Mel Search*
Water Well Constructor
Date *5/16* 19 *84*

NOTICE TO WATER WELL CONSTRUCTOR
The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion.

SP 45292-630

file T-10604

LAKE 51272

" TO "

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

WELL I.D. # L 47493
START CARD # 138804

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

(1) LAND OWNER
Name Tim Warkenton Well Number _____
Address PO Box 12
City Christmas Valley State OR Zip 97641

(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 340
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
18"	0 18 1/2	Concrete	0 18 1/2	26	26 SACKS
14"	18 1/2 131				
12"	131 315				
8"	315 340				

How was seal placed: Method A B C D E
 Other poured
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Casing:	Diameter	From To	Gauge	Steel	Plastic	Welded	Threaded

Drive Shoe used Inside Outside None
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"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Artesian
Yield gal/min 200+ Drawdown 0 Drill stem at 315 Time 1 hr.

Temperature of water 51 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 LAKE Latitude _____ Longitude _____
Township 25 N or S Range 18 E E or W. WM.
Section 9 SW 1/4 NW 1/4
Tax Lot 2100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Green Barrel Ln

(10) STATIC WATER LEVEL:
-40 ft. below land surface. Date 6-1-02
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found -72

From	To	Estimated Flow Rate	SWL
<u>-72</u>	<u>-315</u>	<u>200+</u>	<u>-40</u>

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>Sandy Top Soil</u>	<u>0</u>	<u>7</u>	
<u>Brn Claystone</u>	<u>7</u>	<u>11</u>	
<u>gray Lava-clay seams</u>	<u>11</u>	<u>123</u>	<u>-40</u>
<u>Brn Claystone</u>	<u>123</u>	<u>129</u>	
<u>Brkn Lava</u>	<u>129</u>	<u>318</u>	
<u>Black Basalt</u>	<u>318</u>	<u>340</u>	

RECEIVED RECEIVED
JUN 03 2002 MAR 22 2010
WATER RESOURCES DEPT. SALEM, OREGON WATER RESOURCES DEPT. SALEM, OREGON

Date started 5-22-02 Completed 5-30-02

(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.
WVC 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.
WVC Number 1568
Signed David J. Kuhn Date 6-1-02

T 11037

File T-10604

LAKE 51281

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL ID. # L 47493
START CARD # 138809

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

(1) LAND OWNER Name Tim Warkentin Well Number _____
Address PO Box 12
City Christmas Valley State OR Zip 97641

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

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
8"	340	490	undisturbed			

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 _____

	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:					<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"/>

Drive Shoe used Inside Outside None
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"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min 560+ Drawdown _____ Drill stem at _____ Time 1 hr.

Temperature of water 51° 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 LAKE Latitude _____ Longitude _____
Township 25 S N or S Range 18 E E or W. WM.
Section 9 SW 1/4 NW 1/4
Tax Lot 2100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Green Barrel Ln.

(10) STATIC WATER LEVEL:
40 ft. below land surface. Date 6-26-02
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Black Basalt	340	355	
Brkn gray lava	355	390	
Brkn Rock cong	390	490	

RECEIVED JUL 08 2002
RECEIVED MAR 22 2010
WATER RESOURCES DEPT. SALEM, OREGON
WATER RESOURCES DEPT. SALEM, OREGON

Date started 6-24-02 Completed 6-25-02

(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 1568
Signed David J. Kuhn Date 6-29-02

T 11037

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

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

LAKE
51487

WELL I.D.# 47493
 START CARD # 157570

(1) OWNER: Tim Warkentin Well Number _____
 Name Tim Warkentin

Address PO Box 12
 City Christmas Valley State OR Zip 97741

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

HOLE		SEAL	
Diameter	From To	Material	From To
12"	490-565	undisturbed	

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:					<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) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Tube/pipe size	Casing	Liner
							<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
700+	~40	560	1 hr.

Temperature of water 51 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 LAKE Latitude _____ Longitude _____
 Township 25S N or S Range 18E E or W. WM.
 Section 9 SW 1/4 NW 1/4
 Tax Lot 2100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) NONE ASSIGNED

(10) STATIC WATER LEVEL:
-40 ft. below land surface. Date 4-3-04
 Artesian pressure _____ lb. per square inch. Date _____

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

From	To	Estimated Water Yield	SWL

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
BTKN LAUM ROCK	490	525	
BTK SML	525	540	
BTKN LAUM ROCK	540	565	

RECEIVED
 APR 06 2004
 WATER RESOURCES DEPT
 SALEM, OREGON

RECEIVED
 APR 6 2004
 WATER RESOURCES DEPT
 SALEM, OREGON

Date started 4-3-04 Completed 4-3-04

(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 1568
 Signed David J. Kuhn Date 4-5-04

T 11037

29
 NOTICE TO WATER WELL CONTRACTOR
 The original and first copy of this report
 shall be filed with the
 WATER RESOURCES DEPARTMENT,
 SALEM, OREGON 97310
 within 30 days of the date
 of well completion.

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

State Well No. 245/18E-3500

State Permit No. _____

WATER RESOURCES DEPT

(1) **OWSALEM, OREGON**

Name Bob Stockhoff
 Address 37990 Hillside Rd
Seaside Oregon 97134

(2) **TYPE OF WORK (check):**

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) **TYPE OF WELL:**

Rotary Driven
 Cable Jetted
 Dug Bored

(4) **PROPOSED USE (check):**

Domestic Industrial Municipal
 Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded

14" Diam. from 0 ft. to 20 1/2 ft. Gage 250.
 " Diam. from _____ ft. to _____ ft. Gage _____
 " Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Perforated? Yes No.

Type of perforator used _____

Size of perforations in. by in.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.
 _____ perforations from _____ ft. to _____ ft.

(7) **SCREENS:**

Well screen installed? Yes No

Manufacturer's Name _____
 Type _____ Model No. _____
 Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
 Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) **WELL TESTS:**

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?
 Yield: gal./min. with ft. drawdown after hrs.
 " " " " " "
 " " " " " "
 Bailer (test 400 gal./min.) with ft. drawdown after hrs.
 Artesian flow g.p.m.

Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) **CONSTRUCTION:**

Well seal—Material used cement
 Well sealed from land surface to 18 1/2 ft.
 Diameter of well bore to bottom of seal 7 1/4 in.
 Diameter of well bore below seal 12" - 8" in.
 Number of sacks of cement used in well seal 11 sacks
 How was cement grout placed? pressure grout

Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.

Did any strata contain unusable water? Yes No

Type of water? _____ depth of strata _____

Method of sealing strata off _____

Was well gravel packed? Yes No Size of gravel: _____

Gravel placed from _____ ft. to _____ ft.

(10) **LOCATION OF WELL:**

County Lake Driller's well number 50
SE 1/4 SW 1/4 Section 35 T.245 R.18E W.M.
 Bearing and distance from section or subdivision corner _____

(11) **WATER LEVEL: Completed well.**

Depth at which water was first found _____ ft.
 Static level 81 ft. below land surface. Date May 30
 Artesian pressure _____ lbs. per square inch. Date _____

(12) **WELL LOG:**

Diameter of well below casing 12" 8"

Depth drilled 462 ft. Depth of completed well 460 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 and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Black sand	335	342	1
Green claystone	342	367	1
hard rock	367	386	19
crems with dark sand	386	387	1
hard grey silt	387	440	-53
Broken	440	444	-6
gray sand lava	444	457	-13
Crusty silt claystone	457	459	1
very hard grey silt	459	462	-3
			92

12" hole to 129'
RECEIVED
 MAR 22 2010
 WATER RESOURCES DEPT
 SALEM, OREGON

Work started May 26 1979 Completed May 31 1979
 Date well drilling machine moved off of well May 31 1979

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] Steve L. Adams Date June 1, 1979
 (Drilling Machine Operator)

Drilling Machine Operator's License No. 1302

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 Lyle R. Adams
 (Person, firm or corporation) (Type or print)

Address Box 3 Box 122 X Hillside Ave
97123

[Signed] Lyle R. Adams
 (Water Well Contractor)

Contractor's License No. 690 Date June 1, 1979

T 11037

