

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

16  
**BENT**  
1377

**RECEIVED**

JUN 17 1994

1/5/5w/10  
64 359  
~~377~~

(START CARD) #

Instructions for completing this report are on the last page of WATER RESOURCES DEPT.

(1) OWNER:

Name John F. Morgan Well Number \_\_\_\_\_  
Address P.O. Box 1920  
City Corvallis State Oreg Zip 97339

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	19	Cement	0	19	8
6"	19	615				

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:	6"	+1	19	250	<input checked="" 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	Tele/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 Artesian	Time
4	304	614	<input checked="" type="checkbox"/> Air <input type="checkbox"/> Artesian	1 hr.

Temperature of water 49 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 Benton Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 11 N or S Range 5 E or W WM.  
Section 10 1/4 1/4  
Tax Lot 800 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) West end of Mitchell Dr  
Corvallis, Oreg - Lewisburg - 97339

(10) STATIC WATER LEVEL:

310 ft. below land surface. Date 5-28-94  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 520

From	To	Estimated Flow Rate	SWL
520	522	4 gal/min	310

(12) WELL LOG:

Material	From	To	SWL
Brown clay on grit	0	4	
Brown sandstone	4	6	
gray basalt	6	45	
black basalt	45	160	
gray basalt	160	250	
light gray basalt	250	335	
black on gray basalt	335	460	
black basalt	460	545	310'
light gray basalt,	545	615	

Date started 5-23-94 Completed 5-27-94

(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 1271  
Signed P. Withers Date 6-15-94