

BENT 50312

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

(START CARD) # 91214

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

(1) OWNER: Well Number 4 Name FRED E. TROTTER Address 6885 N.E. ELLIOTT CIR NE City CORVALLIS State OR Zip 97330

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

(3) DRILL METHOD: [X] Rotary Air [ ] Rotary Mud [ ] 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 218 ft. Explosives used [ ] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Row 1: 6, 105, 197, NA, , ,

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

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: NA Liner: NA

Final location of shoe(s) NA

(7) PERFORATIONS/SCREENS: NA Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour [X] Pump [ ] Bailer [ ] Air [ ] Artesian Yield gal/min 74.6 Drawdown 61 Drill stem at Time 211 1/4 hr

Temperature of water 60 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 44°38'20N Longitude 123°13'97W Township 11S N or S Range 5W E or W. WM. Section 1 1/4 1/4 Tax Lot 1800 Lot Block Subdivision Street Address of Well (or nearest address) SAME AS ABOVE

(10) STATIC WATER LEVEL: 66.6 ft. below land surface. Date 1-26-96 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 133

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 133, 137, 12, 66.6 Row 2: 160, 166, 30, 66.6

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Row 1: GREY BASALT SOFT, 105, 197, 66.6 RECEIVED JAN - 8 1997 WATER RESOURCES DEPT. SALEM, OREGON

Date started 11-5-96 Completed 12-2-96 (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 1238 Signed Date 1-6-97

FOR WATER RESOURCES DEPARTMENT USE ONLY

Date Postmarked 11-14-96  
Date Hand-delivered  
Watermaster Initials

W91212  
WRD Receipt  
Date Fee Received

Check No.

RECEIVED

RECEIVED

MAY 27 1997

START CARD  
NOTICE OF BEGINNING OF WELL CONSTRUCTION  
(as required by ORS 537.762)

NOV 15 1996

WATER RESOURCES DEPT. SALEM, OREGON

WATER RESOURCES DEPT. SALEM, OREGON

This card must be completed, signed by both the owner (or authorized agent) and constructor, and the original must be delivered to the Water Resources Department, 158 12th St. NE, Salem, OR 97310, no later than the day construction or alteration, conversion or abandonment work begins. A \$75 fee shall accompany all notices for new well construction or conversion of an existing hole not previously used to obtain water (make checks payable to the Water Resources Department). Notices meeting this requirement but received without the required fee will not be accepted as properly and timely filed. In addition, the constructor shall provide the "Watermaster Copy" of this notice to the office of the district watermaster within which the well is being constructed, altered, converted or abandoned using one of the following options: (a) by regular mail no later than three (3) calendar days (72 hours) prior to commencement of work; or, (b) by hand delivery, during regular office hours, no later than the day work is commenced; or, (c) by FAX no later than the day work is commenced. If method (c) is used, the original "Watermaster copy" of this notice shall also be mailed or delivered to the office of the district watermaster no later than the day work is commenced. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$75 fee with the start card and for failure to submit cards prior to beginning any construction, alteration, conversion or abandonment work.

Owner's name and mailing address: Fred E. Troher

6885 N.E. Ellinger Cir

Phone: 745-2520 Corvallis OR 97330

Check type of work: Fee Required  New construction  Conversion No Fee Required  Deepening  Abandonment Original Start Card Number 83883

Proposed Commencement Date 11-14-96 Existing or Proposed Well Depth 105 Diameter 6"

Check Use:  Domestic  Thermal  Public System (Community)  Injection  Other  Irrigation  Industrial  Monitoring

Proposed Well Location: County Benton Owner's Well Id. No.

Township 11S (N or S) Range 5W (E or W) Section 1



1. 1/4 of 1/4 of above section

2. Street address of well location Same as Above

3. Tax lot number of well location 1800

4. Attach map with location identified. See reverse of this form for approved maps.

5. Show well location within 1/4, 1/4 of section grid at left.

We hereby certify that we have read the back of this form and that the information provided is accurate to the best of our knowledge.

*Orval Hildebrand* License No. 1238 Company M H Well Drilling  
Bonded Water/Monitor Well Constructor

*Orval Hildebrand*  
Owner

NOTE: This is not a water right application. The owner is responsible for obtaining a water right through the Water Resources Department, if required. The Oregon Health Division requires plans to be submitted and approved prior to construction if the well is to be used as a public system.

THIS COPY TO DISTRICT WATERMASTER