

BENT  
51098

JAN 11 1999

STATE OF OREGON  
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT.  
SALEM, OREGON

WELL I.D. # L 23204

START CARD # 107085

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

(1) OWNER: Well Number \_\_\_\_\_  
Name CONSUMERS POWER INC.  
Address 6990 WEST HILLS RD  
City PHILOMATH State OR Zip 97370

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10	0	2	BENT	0	2	1 SACK
10	2	53	CEMENT	2	53	14W/BENT
10	53	58	BENT	53	58	2 SACKS

How was seal placed: Method  A  B  C  D  E  
 Other POURED

Backfill placed from NA ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from NA ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: 6	+2	58	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: NA				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 58  
(7) PERFORATIONS/SCREENS: NA

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  Flowing Artesian  
Yield gal/min 30 Drawdown \_\_\_\_\_ Drill stem at 295 Time 1 hr.

Temperature of water 56 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 BACT ?  
Depth of strata: 38 FEET

(9) LOCATION OF WELL by legal description:  
County BENTON Latitude 44°33'26" Longitude 123°20'00"  
Township 12S N or S Range 5W E or W. WM.  
Section 5 D 1/4 A 1/4  
Tax Lot 800 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 6990 WEST HILLS RD, PHILOMATH OR

(10) STATIC WATER LEVEL:  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure 1 lb. per square inch. Date 12-10-98

(11) WATER BEARING ZONES: 242  
Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
242	295	30	2.3

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

Material	From	To	SWL
SOIL	0	2	
YELLOW CLAY	2	4	
BROWN BASALT	4	12	
BLUE BASALT	12	58	

THIS WELL WAS RECASED AND RESEALED TO SHUT OFF A SMALL WATER STRATA AT 38 FEET AS IT MAYBE A SOURCE OF CONTAMINATION

Date started 12-2-98 Completed 12-10-98

(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 \_\_\_\_\_ Date \_\_\_\_\_ WWC Number \_\_\_\_\_

(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 *Orval Hildebrand* Date 12-11-98 WWC Number 1238