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

WATER RESOURCES DEPT.
SALEM, OREGON

WELL I.D. # L 36145
START CARD # 128753

Instructions for completing this report are on form.

(1) OWNER: Well Number 1823
Name Monte. School Dist.
Address 365 North 5th
City Monte. State OR Zip 97145

(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 350ft.
Explosives used Yes No Type _____ Amount _____

Diameter		From		To		Material		From		To		Sacks or pounds	
10"	6"	0'	19'	19'	350'	Cement	0'	19'	8	Sacks			

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"	0'	19'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	0'	350'	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 6" @ 19'

(7) PERFORATIONS/SCREENS:

Perforations Method Elect Saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
70'	349'	1/8x5	315			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
5.6 gpm		350'	1 hr.

Temperature of water 57° 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 14S N or S Range 06W E or W. M.
Section 12 SE 1/4 SE 1/4
Tax Lot 1100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 25398 Dawson Rd. Monte., OR

(10) STATIC WATER LEVEL:
86 ft. below land surface. Date 11-23-99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 98'

From	To	Estimated Flow Rate	SWL
98'	99'	1 1/2 gpm	86'
337'	338'	3 1/2 gpm	86'

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	2	
Brown Clay	2	7	
Weathered Sandstone	7	12	
Blue Grey Sandstone	12	45	
Dark Grey Sandstone	45	241	86'
Gray Sandstone	241	308	86'
Dark Grey Sandstone	308	350	86'

Date started 11-22-99 Completed 11-23-99
(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 751
Signed Donald J. Perwing Date 11-23-99