

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 34792
START CARD # 131822

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

(1) **LAND OWNER** Well Number _____
Name PIONEER VILLAGE WATER CO
Address PO BOX 771
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 710 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
6	425	710	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:**

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>NA</u>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: <u>4 1/2</u>	<u>1</u>	<u>710</u>	<u>160</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<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 DRILL
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
490	510		80	1/2		<input type="checkbox"/>	<input checked="" type="checkbox"/>
590	610		80	1/2		<input type="checkbox"/>	<input checked="" type="checkbox"/>
690	710		80	1/2		<input type="checkbox"/>	<input checked="" 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	Drawdown	Drill stem at	Time
13	60 1/2	PUMP/500'	1 hr.
12 1/2	60 1/2		1 1/2

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 _____
Depth of strata: _____

(9) **LOCATION OF WELL by legal description:**
County BENTON Latitude 44° 29' 59" Longitude 123° 26' 02"
Township 12S N or S Range 6W E or W. W.M.
Section 28 1/4 _____ 1/4 _____
Tax Lot 900 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) CLOSE TO 31765
MCGLOUGHLIN DR. PHILOMATH

(10) **STATIC WATER LEVEL:**
339 1/2 ft. below land surface. Date 8-18-01
Artesian pressure _____ lb. per square inch Date _____

(11) **WATER BEARING ZONES:**
Depth at which water was first found 477

From	To	Estimated Flow Rate	SWL
477	480	6	339 1/2
611	613	2	339 1/2

(12) **WELL LOG:**
Ground Elevation _____

Material	From	To	SWL
GREY SANDSTONE	425	451	339 1/2
PINK/GREY S STONE	461	477	339 1/2
GREY SANDSTONE	477	710	339 1/2

RECEIVED
AUG 30 2001
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 8-14-01 Completed 8-21-01

(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 Arnold Hilobrandt Date 8-23-01