BENT 53409

07-15-2007

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 90453

START CARD # 1001326

(1) LAND OWNER

Owner Well I.D. _____

First Name Isidoro & Vicki Last Name Ciciriello

Company

Address 2100 NW Highland DR

City Corvallis State OR Zip 97330

(2) TYPE OF WORK

[X] New Well [ ] Deepening [ ] Conversion [ ] Alteration (repair/recondition) [ ] Abandonment

(3) DRILL METHOD

[X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud [ ] Reverse Rotary [ ] Other

(4) PROPOSED USE

[X] Domestic [ ] Irrigation [ ] Community [ ] Industrial/ Commericial [ ] Livestock [ ] Dewatering [ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)

Depth of Completed Well 196.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/ lbs
10	0	28	Bentonite Chips	0	28	23	S
6	28	196					

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E

[X] Other poured

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: [ ] Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
(●)	( )	6	[X]	1	28	250	(●)	( )	[X]	[ ]
( )	(●)	4.5	[ ]	0	196	160	( )	(●)	[X]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]

Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 28

Temp casing [ ] Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method Drilled Hole

Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Liner	4.5	136	176	.5	.5	160	

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

(●) Pump ( ) Bailer ( ) Air ( ) Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
32.7		180	4

Temperature 55 °F Lab analysis [ ] Yes By _____

Water quality concerns? [ ] Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Benton Twp 11.00 S N/S Range 5.00 W E/W WM

Sec 22 _____ 1/4 of the _____ 1/4 Tax Lot 300

Tax Map Number _____ Lot _____

Lat ___° ___' ___" or 44.60596000 DMS or DD

Long ___° ___' ___" or 123.27919000 DMS or DD

( ) Street address of well (●) Nearest address

3835 NW glen Eden Drive Corvallis OR 97330

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening			[ ]	
Completed Well			[ ]	

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 88

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
06-26-2007	86	92	10		[ ]	65
06-27-2007	187	192	20		[ ]	65
					[ ]	
					[ ]	
					[ ]	

(11) WELL LOG

Ground Elevation _____

Material	From	To
soil	0	6
gray basalt	6	105
soft brown basalt	105	130
gray basalt	130	180
red basalt	180	196

Date Started 06-25-2007 Completed 07-06-2007

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number _____ Date _____

Electronically Filed

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1238 Date 07-15-2007

Electronically Filed

Signed ORVAL HILDERBRAND (E-filed)

Contact Info (optional) Mike Merritt

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

Form Version: 0.88