

STATE OF OREGON
WATER SUPPLY WELL REPORT

BENT 53958

WELL LABEL # L 100058
START CARD # 201351
ORIGINAL LOG # _____

(ORS 537.765 & OAR 690-205-0210)

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

(1) LANDOWNER
Owner Well I.D. 2730
First Name Ralph & Diane Last Name Nauman
Company _____
Address 2304 Violet Ave NW
City Albany State OR Zip 97321

(2) TYPE OF WORK New Conversion Deepening
 Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth _____ ft.
Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

(3) DRILL METHOD Rotary Air Rotary Mud Auger
 Cable Cable Mud Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/Commercial Livestock Dewatering Injection
 Thermal Other _____

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 24' ft. Special Standard: Yes (attach copy)

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amount	Scks/lbs
10"	0'	18'	Bentonite	0'	18'	8	Scks
6"	18'	24'					

How was seal placed: Method A B C D E
 Other Bentonite Placed @ 15k pr. 5 min rate
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Csng	Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		6"		1'	24'	.250	X		X	

Shoe Inside Outside Other Location of shoe(s) 24'
Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method Air Perforator
Screens Type _____ Material _____

Perf	Scrn	Csng	Linr	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size
X	X				19'	23'	5"	11"	40	

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 2 gpm Drawdown _____ Drill stem/Pump depth 24' Duration (hr) 1 Hr
Temperature 57°F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS _____ ppm
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)
County Benton Twp 105 N or S Range 04W E or W.M.
Sec 36 NW 1/4 of the NE 1/4 Tax Lot 400
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
Street Address of Well (or nearest address) Across St From 2304 Violet Ave NW Albany OR

(10) STATIC WATER LEVEL

Existing Well/Pre-Alteration	Date	SWL (psi)	+	SWL (ft)
Completed Well	<u>7-6-09</u>			<u>13'</u>

Flowing Artesian? Yes Dry Hole? Yes
WATER BEARING ZONES Depth water was first found 19'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>7-6-09</u>	<u>19'</u>	<u>23'</u>	<u>2 gpm</u>			<u>13'</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
Topsoil	0	2
Brown Clay	2	15
Brown Sand & Gravel	15	23
Blue Clay	23	24

RECEIVED
AUG 04 2009
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 7-6-09 Completed 7-6-09

(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 _____
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 751 Date 7-6-09
Signed Donald J. Loving
Contact Info. (optional)
Donald J. Loving
Mid Valley Drilling Inc