STATE OF OREGON WATER SUPPLY WELL REPORT

BENT 54884

WELL LABEL # L	113642	
START CARD#		
OPICINAL LOG#		

Instructions for completing this report are on the last page of this form.	ORIGINAL LOG#	
(1) LANDOWNER Owner Well I.D. First Name Solve Last Name Eveland	(9) LOCATION OF WELL (legal description) County <u>Bertice</u> Twp <u>/2</u> N o Range <u>6</u> E or W.M.	
ompany Address 25159 Groge half RO. City Philogeth State OR Zip 77370 (2) TYPE OF WORK PNew Conversion Deepening Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a) (2a) PRE-ALTERATION: Well Depth ft.	Sec 13 ww 1/4 of the ww 1/4 Tax Lot 900 Tax Map Number Lot Lot Lat " or " or " DMS or DD Long " or " DMS or DD	
Seal Material Casing Type:	(10) STATIC WATER LEVEL Date SWL(psi) + SWL (ft)	
(3) DRILL METHOD	Existing Well/Pre-Alteration Completed Well Flowing Artesian? Yes Dry Hole? Yes WATER BEARING ZONES Depth water was first found 75	
(4) PROPOSED USE	SWL Date From To Est Flow SWL (psi) + SWL (ft) 4-9-14 35 35 12	
(5) BORE HOLE CONSTRUCTION Depth of Completed Well/05 ft. Special Standard: BORE HOLE SEAL		
Dia From To Material From To Amount Ckly 10 6 24/2 Cement 0 24/2 8 6 24/2 105	(11) WELL LOG Ground Elevation To Material From To Brew Top Soil C 2	
How was seal placed: Method A B C D E Other Backfill placed from ft. to ft. Material ilter pack from ft. to ft. Material Size	Sticky clay (Bure) 12 17 Sery Basalt (Hood) 17 35 Blue Boseit (Hood) 35 105	
(5a) ABANDONMENT USING UNHYDRATED BENTONITE: Calculated Amount Proposed to be Used:		
(6) CASING/LINER Csng Linr Dia + From To Gauge Steel Plastic Welded Thr	SALEM, OR	
Shoe Inside Outside Other Location of shoe(s) To Date Started 4-9-2014 Completed 4-9-2014 (unbonded) Water Well Constructor Certification I certify that the work I performed on the construction, deepening, alteration of the construction of this well is in compliance with Oregon water supply well		
(7) PERFORATIONS/SCREENS Perforations Method /4 Row Hole Orded Screens Type Material	construction standards. Materials used and information reported above are true to the best of my knowledge and belief. License Number Date	
Perf Scrn Csng Linr Dia From To Screen/ slot slot slots siots siot	(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.	
(8) WELL TESTS: Minimum testing time is 1 hour Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 35	and belief. License Number 1753 Date 4-9-2014 Signed Contact Info. (optional)	
Water quality concerns? Yes (describe below) TDS 180 ppr From To Description Amount Units	_	
1	THE PART OF THE PA	