

STATE OF OREGON
WATER SUPPLY WELL REPORT

BENT 57070

WELL I.D. LABEL# L

158357

START CARD #

1083318

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

9/2/2026

(1) LAND OWNER

Owner Well I.D. _____

First Name MATT & JESSELast Name COOK

Company _____

Address 35999 KINGS VALLEY HWYCity PHILOMATHState ORZip 97370**(2) TYPE OF WORK**☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing:

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
					☐	☐	☐	☐

Seal:

Material	From	To	Amt	sacks/lbs

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Reverse Rotary ☐ Other _____
(4) PROPOSED USE
☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____
(5) BORE HOLE CONSTRUCTIONSpecial Standard ☐ (Attach copy)Depth of Completed Well 225.00 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
10	0	18.5	Cement	0	18.5	6	S
6	18.5	225			Calculated	5	
					Calculated		

Seal placement method: ☐ A ☐ B ☒ C ☐ D ☐ E ☐ Other: _____

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

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

Explosives used: ☐ Type _____ Amount _____Seal Placement Begin Date 8/24/2026 Begin Time 16 00**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount _____

Actual Amount _____

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	6	☒	1.5	18.5	0.250	ST	☒			
L	4		0	225	SDR26	PL	☒			

Temp casing ☒ Yes Dia 10 From + ☐ 0 To 8**(7) PERFORATIONS/SCREENS**Perforations Method .250 round holes drilled

Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
		4	105	225	.25	0.25	600	

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	6		225	1

Temperature 58 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 156 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County BENTON Twp 11.00 S N/S Range 6.00 W E/W WMSec 16 SE 1/4 of the NW 1/4 Tax Lot 102

Tax Map Number _____ Lot _____

Lat _____ " or 44.61616652 DMS or DD

Long _____ " or -123.42581453 DMS or DD

☒ Street address of well ☐ Nearest address35999 KINGS VALLEY HWY, PHILOMATH, OR 97370**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	8/25/2026			17
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 185.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
8/25/2026	185	200	6			17

(11) WELL LOGGround Elevation 670.16 FT

Material	From	To
top soil	0	2
brown loose soil with small cobbles	2	8
brown sticky clay	8	10
brown sand stone	10	11
blue basalt	11	140
dark blue basalt	140	180
black basalt	180	185
dark blue basalt with quartz fractured	185	200
blue basalt mixed with green soap stone	200	225

Construction

Begin Date 8/24/2026 Begin Time 09 00 End Date 8/25/2026**(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 1753 Date 9/2/2026Signed CLINTON KINNEY (E-filed)Drilling Company: corvallis drilling co inc

ORIGINAL - WATER RESOURCES DEPARTMENT

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

New exempt use wells must be submitted with a map and recording fee.

Comments/Remarks

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

BENT 57070

9/2/2026

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department
725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 44.61616652 Datum: WGS84

Longitude: -123.42581453

Township/Range/Section/Quarter-Quarter Section:
WM11.00S6.00W16SENW

Address of Well:

35999 KINGS VALLEY HWY, PHILOMATH, OR 97370

Well Label: 158357

Printed: September 2, 2026

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

