

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.765)

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NOV 18 1991 115/5W-2cb

NOV - 7 1991

*Bent
805*

WATER RESOURCES DEPARTMENT WATER (START CARD) # 34991

(1) OWNER: Well Number 2395
 Name Marvin McDougal
 Address 30992 Echo Hill Terrace
 City Lebanon State OR Zip 97355

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 405 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
10	0 29	Cement	0 29	8 sacks	
6	0 405	BORE			

How was seal placed: Method A B C D E
 Other

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6	1	29	250	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: NONE				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) NONE

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>NONE</u>							

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
35			1 hr.

Temperature of Water 56° Depth Artesian Flow Found X
 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 _____ Longitude _____
 Township 11 N or S Range 5 E or W WM.
 Section 2 NW 1/4 SW 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Vineyard Mountain Rd.

(10) STATIC WATER LEVEL:
97 ft. below land surface. Date 9/6/91
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
<u>245</u>	<u>250</u>	<u>35gpm</u>	<u>97</u>

(12) WELL LOG:
 Ground elevation _____

Material	From	To	SWL
<u>Topsoil</u>	<u>0</u>	<u>4</u>	
<u>Basalt Red & Blue</u>	<u>4</u>	<u>405</u>	

Date started 11-1-91 Completed 11-4-91

(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 well construction standards. Materials used and information reported above are true to my best 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 well construction standards. This report is true to the best of my knowledge and belief.
 WWC Number 574
 Signed Bob Jones Date 11/5/91