

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

19  
COOS  
1252

COOS 1252 NOV 14 1994

7285/R14W/S5 NW 1/4  
(START CARD) # 71678 66

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

(1) OWNER:

Name Michael Kieser  
Address 2450 N LAVERGUE  
City CHICAGO State IL Zip 60614

Well Number 322

SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County COOS Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 28 N or S Range 14 E or W/W.M.  
Section 3 NW 1/4 NW 1/4  
Tax Lot 100/200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Randolph Rd.  
North well 32220

(2) TYPE OF WORK

New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:

Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:

Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other Test well

(5) BORE HOLE CONSTRUCTION:

Special Construction approval  Yes  No Depth of Completed Well 44' 10"  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	18	Cement	0	18	10
6"	18	50				

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	38' 11"	1.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method Telescope  
 Screens Type Johnson Material Stainless steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
38' 11"	44' 10"	.016		6"	TEK	<input type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailer  Air  Flowing  Artesian

Yield gal/min	Drawdown	Drill stem at	Time
16.2	17' 2"	44	1 hr.

Temperature of water 52° Depth Artesian Flow Found \_\_\_\_\_  
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: \_\_\_\_\_

(10) STATIC WATER LEVEL:

19' 2" ft. below land surface. Date 11/1/94  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 19' 2"

From	To	Estimated Flow Rate	SWL
19' 2"	44'	27	192'

(12) WELL LOG:

Ground Elevation +/- 200'

Material	From	To	SWL
Sand Fine Brown	0	27	192'
Sand w/ wood med. Brown	27	29	
Gravel medium - Fine w/	29	44	
Sand medium - Fine Gray + Brown			
Clay sandy Gray + Brown	44	50	

Date started 10/31/94 Completed 11/2/94

(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 water supply well construction standards. Materials used and information reported above are true to the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 1493  
Signed John Mack Sr. M6WC Date 11/10/94



Oregon Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem Oregon 97301  
 (503) 986-0900  
 www.wrd.state.or.us

# Application for Well ID Number

*Do not complete if the well already has a Well I.D Number.*

**I. OWNER INFORMATION**

Current Owner Name (please print): Bandon Duress Golf Resort "old StateWell"  
 Mailing Address: 57744 Round Lake Drive Athn: Warren Felton  
 City: Bandon State: OR Zip: 97411  
 Mailing Address (to send Well I.D.): \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**II. WELL INFORMATION** (Do not complete this section if the well report is attached.)

Township: 28S (North/South) Range: 14W (East/West) Section: 5  
 Tax Lot: \_\_\_\_\_ County: COOS 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
 Street Address of Well: \_\_\_\_\_ City: \_\_\_\_\_  
 Owner at time the well was constructed, (if known): \_\_\_\_\_  
 If the property had a different street address in the past: \_\_\_\_\_

**III. GENERAL WELL INFORMATION** (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): monitoring  
 Date Well Constructed: \_\_\_\_\_ Total Well Depth: \_\_\_\_\_ Casing Diameter: 6"  
 Other Information: MP = 11ft

SUBMITTED BY (please print): Jen Woody, OWRD  
 PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

Send application to Oregon Water Resources Department; 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.

<i>For Official Use Only by the Oregon Water Resources Department.</i>		
Received Date:	Well Log Number:	Well Identification #:
_____	<u>COOS 1252</u>	<u>L103084</u>