

0005
509353

RECEIVED

MAY 29 1998

27-14-31

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

WATER RESOURCES DEPT. WELL I.D. # L 10848
SALEM, OREGON START CARD # 111563

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

(1) OWNER: Well Number 552
Name Michael Keiser / Brandon Dunes L.P.
Address 2450 N Lakewood
City Chicago State IL Zip 60614

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other Set Pitless adapter

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 180' ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
<u>12 1/4"</u>	<u>0</u>	<u>180</u>	<u>Previously installed</u>			<u>NOT</u>
<u>6"</u>	<u>180</u>	<u>185</u>	<u>Disturb</u>			<u>Disturb</u>

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

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 13A ft. to 180 ft. Size of gravel 6/9

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>8"</u>	<u>-2</u>	<u>147 1/2</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<u>8"</u>	<u>167 1/2</u>	<u>180</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(Tail Pipe)				<input type="checkbox"/>	<input type="checkbox"/>	<input 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:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>147 1/2</u>	<u>167 1/2</u>	<u>070</u>		<u>8"</u>	<u>Pipe</u>	<input type="checkbox"/>	<input type="checkbox"/>

Method Attached to casing
Type Houston V-Wire Material Stainless Steel

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Completed Earlier Drawdown 20'3" Drill stem at 140 Time 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: _____

(9) LOCATION OF WELL by legal description:
County COOS Latitude _____ Longitude _____
Township 27 N or S Range 14 E or W WM.
Section 31 NE 1/4 SE 1/4
Tax Lot 400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) End of Randolph West
Brandon OR

(10) STATIC WATER LEVEL:
83'3" ft. below land surface. Date 5/19/98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 10'

From	To	Estimated Flow Rate	SWL
<u>10</u>	<u>81</u>	<u>50+</u>	<u>10</u>
<u>105</u>	<u>138</u>	<u>100+</u>	<u>67</u>
<u>148</u>	<u>177</u>	<u>4-540</u>	<u>83.3</u>

(12) WELL LOG:
Ground Elevation +1-300'

Material	From	To	SWL
<u>Well Previously Drilled</u>			
<u>7/24/97</u>			
<u>Applied for special standards</u>			
<u>to lower well because of</u>			
<u>well location on golf course</u>			
<u>(see attached)</u>			

RECEIVED

JUL - 1 1998

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 5/19/98 Completed 5/22/98
(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 Brandon Well + Septic Co. inc 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 Jim Mack A. McGWC Date 5/27/98