

0005
51228

RECEIVED

JAN 20 1999

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

WELL I.D. # L 25044
START CARD # 115449

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT. SALEM, OREGON

(1) OWNER: Well Number # 2
Name DAVE BROOKS
Address RT 1 Box 906
City BANDON State OR Zip 97411

(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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 57 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL					
Diameter	From To	Material	From To	Sacks or pounds			
10"	0 20	BENTONITE	0 20	14 SACKS			
6"	20 57						

How was seal placed: Method A B C D E
 Other POURED FROM SURFACE
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Diameter	From	To	Gauge	Steel				Plastic				Welded				Threaded			
				Steel	Plastic	Welded	Threaded	Steel	Plastic	Welded	Threaded	Steel	Plastic	Welded	Threaded	Steel	Plastic	Welded	Threaded
Casing: 6"	1	32	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
TAIL: 5"	47	57	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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
From To Slot size Number Diameter Tele/pipe size Casing Liner
32 47 018 _____ 6" TELE.

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 50 Drawdown 48' Drill stem at 50 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 COO'S Latitude _____ Longitude _____
Township 29 N or S Range 14 E or W. WM.
Section 7 SE 1/4 SW 1/4
Tax Lot 2100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
7 ft. below land surface. Date 12-13-98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 5'

From	To	Estimated Flow Rate	SWL
<u>5'</u>	<u>47</u>	<u>50 GPM</u>	<u>7'</u>

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
ROAD GRAVE + FILL DIRT	0	3	
SAND FINE AND CLAY GRAY	3	5	
SAND FINE AND CLAY AND WOOD BROWN	5	18	7'
SANDSTONE BROWN WITH SIL GRAVEL AND MULEH DARK BROWN	18	23	7'
SAND AND GRAVE MED GRAY	23	47	7'
SANDY CLAY GRAY	47	57	

RECEIVED

FEB 26 1999

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 12-12-98 Completed 12-13-98

(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 _____ 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 1647
Signed COLEMAN Date _____