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STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT. SALEM, OREGON

WELL I.D. # L 28644 START CARD # 120911

COOS 51358

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

(1) OWNER: Well Number 655 Name Appligatz Christian Fellowship Address 7590 Hwy 238 City Jacksonville State OR Zip 97530

(2) TYPE OF WORK: [ ] New Well [ ] Deepening [X] Alteration (repair/recondition) [ ] Abandonment

(3) DRILL METHOD: [X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Other

(4) PROPOSED USE: [ ] Domestic [X] Community [ ] Industrial [ ] Irrigation [ ] Thermal [ ] Injection [ ] Livestock [X] Other Christian Camp

(5) BORE HOLE CONSTRUCTION: Special Construction approval [ ] Yes [X] No Depth of Completed Well 200' ft. Explosives used [ ] Yes [X] No Type Amount

Table with columns: HOLE Diameter, SEAL From, To, Material, From, To, Sacks or pounds. Row 1: 6", +1, 200, Cement, 0, 30, 10.5. Note: Previously installed Not Disturbed

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: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 6", +1, 35, 250, [X], [ ], [X], [ ]. Liner: 5", -5, 200, 214, [ ], [X], [X], [ ]

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: From ?, To ?, Slot size ?, Number, Diameter, Tele/pipe size, Casing [ ], Liner [ ]

(8) WELL TESTS: Minimum testing time is 1 hour [X] Pump [ ] Bailer [ ] Air [ ] Flowing Artesian Yield gal/min 28 Drawdown 1.45' Drill stem at 18.4 Time 1 hr

Temperature of water 53° 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 29 N or S Range 15 E or W WM. Section 13 NW 1/4 NW 1/4 Tax Lot 401 Lot Block Subdivision Street Address of Well (or nearest address) Rt. 1 Box 885 B (Lake Bradley Christian Camp) Bandon

(10) STATIC WATER LEVEL: 20' ft. below land surface. Date 7/8/99 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 20'

Table with columns: From, To, Estimated Flow Rate, SWL. Empty rows.

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

Table with columns: Material, From, To, SWL. Row 1: Remove Pump from well Blow well with air and water to TD 200'

Date started 7/8/99 Completed 7/8/99

(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.

Signed Bandon Well + Septic Co Inc Date WWC Number

(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.

Signed Jim Mack Sr. M GWC Date 7/13/99 WWC Number 1493