

SEP 02 1999

COOS
514100

29-15-1 SE-NE

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

WATER RESOURCES DEPT.
SALEM, OREGON

WELL I.D. # L 20638
START CARD # 111521

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

(1) OWNER: Well Number 673
Name Ocean Spray Cranberries, Inc.
Address 1480 State Route 105
City Aberdeen State WA Zip 98520

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/conditioning/abandonment)

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other
DATE OCT 04 1999

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 29' 1"
Explosives used Yes No Type _____ Amount TOC

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	29	Bentonite	0	18	155x
6"	29	200	Cement	30	200	265x

How was seal placed: Method A B C D E
 Other Bentonite Poured from surface
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 18 ft. to 29 ft. Size of gravel 10/20

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 5"	+1	19' 1"	160#	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6"	+1' 4"	4'	1250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Protective casing)							
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method Attached to casing
 Screens Type Nagiso V-wire Material SS

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
19' 1"	24' 1"	.014		5"	Pipe	<input type="checkbox"/>	<input type="checkbox"/>
24' 1"	29' 1"	.016		5"	Pipe	<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
18	8'	29	1 hr.
Spec Op 2.25 gal / FT of DD			

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 29 N or S Range 15 E or W, W.M.
Section 1 SE 1/4 NE 1/4
Tax Lot 500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Hwy 101
Bandon OR

(10) STATIC WATER LEVEL:
4' 10" ft. below land surface. Date 8/27/99
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
5	24	30-40 GPM	4' 10"

(12) WELL LOG:
Ground Elevation 41-200'

Material	From	To	SWL
Topsoil	0	3	
Sandy Clay Tan	3	5	
Sand Fine-med Brown	5	12	4' 10"
Sand Fine-med w/ Gravel	12	17	
Fine-med. Brown			
Gravel Fine-med w/ sand	17	22	
Fine-CRS Gray			
Gravel w/ wood + Clay Gray	22	24	
Claystone Gray	24	80	
Claystone Gray w/ Quartz lenses	80	125	
Siltstone Gray	125	140	
Claystone Gray w/ Quartz lenses	140	150	
Siltstone Gray	150	162	
Sandstone Gray	162	163	
Claystone Gray	163	170	
Siltstone Gray	170	178	
Serpentine Green	178	181	
Claystone Gray w/ Quartz lenses	181	200	

Date started 8/27/99 Completed 8/30/99

(bonded) 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 Bendon 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 Madsen M.W.C. Date 8/31/99