

MAY 26 2000

COOS 51626

27-14-29

STATE OF OREGON WATER SUPPLY WELL CONSTRUCTION PERMITS SOURCES DEPT. SALEM, OREGON

WELL I.D. # L 34008 START CARD # 123840

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

(1) OWNER: Brandon Jones Well Number 702
Name Brandon Jones
Address 57744 Round Lake Drive
City BRADON State OR Zip 97444

(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 141'6"
Explosives used Yes No Type Amount 702

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Includes entries for Cement at 12 1/4" and 6" diameters.

How was seal placed: Method A B C D E
Backfill placed from 105 ft. to 145 ft. Material Rec
Gravel placed from 105 ft. to 145 ft. Size of gravel Rec

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes entries for 8" casing and liner.

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Includes entry for 15 1/4" to 13 1/4" slot size.

(8) WELL TESTS: Minimum testing time is 1 hour
Yield gal/min 114.8 105.8
Drawdown 12' 7 1/2" 15' 8 1/2"
Drill stem at 126 126
Time 1 hr 25 hr 20 min
Temperature of water 52° Depth Artesian Flow Found

(9) LOCATION OF WELL by legal description:
County Coos Latitude Longitude
Township 27 N or S Range 14 E or W WM.
Section 29 NE 1/4 SW 1/4
Tax Lot 1000 Lot NE Block Subdivision
Street Address of Well (or nearest address) 57744 Round Lake Dr. #3 BRADON

(10) STATIC WATER LEVEL:
94'11" ft. below land surface. Date 5/16/00
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL. Includes entries for 15, 108, 172, 190.

(12) WELL LOG: Table with columns: Material, From, To, SWL. Includes entries for Top Soil, Sand Fine Brown, Silty Clay Gray Brown, etc.

Date started 3/29/00 Completed 5/16/00
(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.
Signed Brandon 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.
Signed Jim Madala MGCW Date 5/24/00 WWC Number 1495

see Pg 2

COOS  
51626

MAY 26 2000

27-14-29

STATE OF OREGON  
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT. (2)

WELL I.D. # L 34008

START CARD # 123840

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

(1) OWNER:

Name Bandon Dunes Well Number 70d  
Address 37744 Round Lake Drive  
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 \_\_\_\_\_ ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	

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:

Casing:	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
					<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"/>
					<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:

From	To	Slot size	Number	Diameter	Material		Casing	Liner
					Type	Tele/pipe size		
							<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"/>

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.

Temperature of water \_\_\_\_\_ 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. W.M.  
Section 29 NE 1/4 SW 1/4  
Tax Lot 1200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 37744 Round Lake Dr, #3 Bandon

(10) STATIC WATER LEVEL:

\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Silty Clay Gray w/ Peat	79	80	
Silty Clay Blue Gray	80	100	
Silty Clay Blue Gray w/ Wood and 5% Fine Gravel	100	108	
Gravel med - Fine Gray	108	109	94"11"
Wood w/silty Clay Gray + 5% med Gravel	109	111	
Silty Clay Gray	111	114	
Gravel med - Fine w/ sand	114	120	
Med - Fine Gray			
Gravel CRS - Fine Gray	120	128	
Gravel med - Fine Gray	128	130	
Silty Clay Gray	130	172	
Gravel - Fine - med Gray	172	173	?
Silty Clay Green Gray	173	190	
Gravel Fine - med Gray	190	193	?
Silty Clay Green Gray	193	220	

Date started 3/29/00 Completed 5/16/00

(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. WWC Number \_\_\_\_\_ 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.

Signed Jim Mack Sr. M.G.W.C. WWC Number 1493 Date 5/24/00