

28-14-05

**STATE OF OREGON
WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

WELL I.D. # L 74686
START CARD # 147930

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

(#8) (Pg 1)

(1) LAND OWNER Name Danone Jones Well Number 968
Address 57744 ROUND LAKE DR.
City Dandon 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 263' 10"
Explosives used Yes No Type _____ Amount 70C

| HOLE | | | SEAL | | | Sacks or pounds |
|----------|------|-----|----------|------|-----|-----------------|
| Diameter | From | To | Material | From | To | |
| 24" | 0 | 30 | Cement | 0 | 101 | 915X |
| 22" | 30 | 101 | Cement | 73 | 192 | 865X |

How was seal placed: Method A B C D E
 Other 0-101 A 73-192 C

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 192 ft. to 260 ft. Size of gravel 3/8 to 1/2

(6) CASING/LINER:

| Diameter | From | To | Gauge | Steel | Plastic | Welded | Threaded |
|----------|------|-----|-------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| 17 1/2" | 0 | 101 | 250 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 10" | 101 | 229 | 250 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10" | 229 | 263 | 250 | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method Attached to Casing
 Screens Type Johnson V-wire Material 55

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|-----|-----------|--------|----------|----------------|--------------------------|--------------------------|
| 229 | 255 | 10" | 100 | 10" PS | Pipe | <input type="checkbox"/> | <input type="checkbox"/> |

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

| Yield gal/min | Drawdown | Drill stem at | Time |
|--------------------|----------|---------------|-------|
| 390 | 75 | 188 | 1 hr. |
| 5.2 gal / Ft of DD | | | |

Temperature of water 54° 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 _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Coos Latitude _____ Longitude _____
Township 28 N or S Range 14 E or W. W.M.
Section 05 SE 1/4 NW 1/4
Tax Lot 400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) West of Randolph St to New Lake, Dandon Jones

(10) STATIC WATER LEVEL:
70' ft. below land surface. Date 7/11/05
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 2'

| From | To | Estimated Flow Rate | SWL |
|------|-----|---------------------|-----|
| 2 | 83 | 30 | 2' |
| 108 | 123 | +1-100 | ? |
| 184 | 190 | +1-100 | 70' |
| 195 | 208 | +1-100 | 70' |
| 229 | 255 | +1-800 | 70' |

(12) WELL LOG:
Ground Elevation _____

| Material | From | To | SWL |
|-------------------------------|------|------|-----|
| Fill | 0 | 2 | |
| Sand Fine Brown | 2 | 12 | 2' |
| Wood w/ Sand F-m Brown | 12 | 14 | |
| Sand F-m Brn w/wood | 14 | 24 | |
| Sand F-m Gray brown | 24 | 40 | |
| Wood w/peat + Sand gray brn | 40 | 45 | |
| Peat | 45 | 47 | |
| Sand F-m w/ Peat + wood | 47 | 63 | |
| Peat w/wood + Sand Fine- | 63 | 65 | |
| medium Gray brown | | | |
| Sand F-m gray brn w/peat lens | 65 | 68 | |
| Sand Fine-med Gray brn | 68 | 83 | |
| Sandy Clay Gray | 83 | 97 | |
| Sandy Clay Gray w/shell | 97 | 105 | |
| Silty Clay Gray | 105 | 108 | |
| Gravel Fine-med Colored | 108 | 112 | ? |
| Gravel med-Ces - Fine | 112 | 12.3 | 1 |
| Green Colored | | | |

Continued on Pg #2
Date started 4/22/04 Completed _____

(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 Chris Kessy WWC Number 1759 Date 7/16/05

(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 & Mowc WWC Number 1493 Date 7/18/05

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JUL 21 2005

WATER RESOURCES DEPT
SALEM, OREGON

28-14-05

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

WELL I.D. # L 74686
START CARD # 147930

(Pg #2)

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

(1) LAND OWNER Barnden Deems Well Number 968
Name Barnden Deems
Address 57744 Round Lake Dr.
City Barnden State OR Zip 97744

(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
Diameter From To Material From To Sacks or pounds

| Diameter | From | To | Material | From | To | Sacks or pounds |
|----------|------|----|----------|------|----|-----------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |

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:

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

Drive Shoe used Inside Outside None
Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | 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"/> |

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____
1 hr.

Temperature of water _____ Depth Artesian Flow _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Yes No
 Salty Muddy Odor Colored Other _____
Depth of strata: _____
JUL 21 2005
WATER RESOURCES DEPT
SALEM, OREGON

(9) LOCATION OF WELL by legal description:
County Coos Latitude _____ Longitude _____
Township 28 N or S Range 14 E or W W.M.
Section 05 SE 1/4 NW 1/4
Tax Lot 400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) W END OF RANDOLPH S TO NEW LAKE, BARNDEN DEEMS

(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 |
|-------------------------------|------|-----|-----|
| Sandy Clay Gray | 123 | 137 | |
| Soft Sandstone + Sandy | 137 | 147 | |
| Clay Green | | | |
| Gravel CRS - Fine green gray | 147 | 149 | |
| Sandy Clay Green Gray | 149 | 166 | |
| Gravel CRS - Fine Green Gray | 166 | 167 | |
| Sandy Clay green w/ Gravel | 167 | 178 | |
| Sandy Clay green gray | 178 | 184 | |
| Gravel M-C-F green gray | 184 | 190 | 70' |
| Sandy Clay Gray | 190 | 195 | |
| Gravel M-F green gray | 195 | 208 | 70' |
| Sandy Clay Gray | 208 | 218 | |
| Sandy Clay Gray w/ wood | 218 | 229 | |
| Gravel M-F green w/ wood | 229 | 239 | 70' |
| Gravel M-C-F w/ shell w/ wood | 239 | 250 | |
| Gravel CRS - Fine w/ shell | 250 | 255 | |
| Sandstone gray Hard | 255 | 260 | |

Date started 4/22/04 Completed 7/11/05

(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 1493
Signed Jim Mack & Mowe Date 7/18/05