

STATE OF OREGON
WATER SUPPLY WELL REPORT

(ORS 537.765 & OAR 690-205-0210)

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

COOS 54789

WELL LABEL # L 102283
START CARD # 204873
ORIGINAL LOG #

(1) LANDOWNER Owner Well I.D.
First Name Andy Last Name Taylor
Company
Address 54794 Bear Creek Rd
City Beaverton State OR Zip 97411

(2) TYPE OF WORK ☒ New ☐ Conversion ☐ Deepening
☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth _____ ft.

Seal Material _____

Casing Type: ☐ Steel ☐ Plastic ☐ Other _____

Casing Gauge _____ Casing Diameter _____

(3) DRILL METHOD ☒ Rotary Air ☐ Rotary Mud ☐ Auger
☐ Cable ☐ Cable Mud ☐ Reverse Rotary ☐ Other _____

(4) PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection
☐ Thermal ☐ Other _____

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 79 ft. Special Standard: ☐ Yes (attach copy)

BORE HOLE			SEAL			
Dia	From	To	Material	From	To	Amount (Scks/lbs)
10	0	22	Bent	22	0	16 Sacks
6	22	79				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☐ Other poured from top

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:

Calculated Amount Proposed to be Used: _____ sacks/lbs

Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Casing	Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		6"	+	1	79	.250	X			X
	X	4 1/2"		0	79	SH 40		X	X	

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) NONE

Temporary casing ☐ Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method (casing perforator) (Liner w/sond)
Screens Type _____ Material _____

Perf	Scrn	Casing	Linr	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size
X		X			60	79	1/8"	1	304	6"
X			X		39	79	1/8"	5"	36	4 1/2"

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min _____ Drawdown _____ Drill stem/Pump depth _____ Duration (hr) _____

Temperature 52 °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS _____

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County COOS Twp 28 N or S Range 14 W E or W W.M.

Sec 34 SW 1/4 of the NE 1/4 Tax Lot 1038

Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD

Long _____ " or _____ DMS or DD

Street Address of Well (or nearest address) 54794 Bear Creek

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Pre-Alteration				
Completed Well	10-6-10			31

Flowing Artesian? ☐ Yes Dry Hole? ☐ Yes

WATER BEARING ZONES Depth water was first found 61 bgs

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
10-6-10	61	79	89 gpm			31

(11) WELL LOG

Ground Elevation 202'

Material	From	To
Brown Clay	0	16
Grey Clay Stone	16	79

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NOV 05 2010

WATER RESOURCES DEPT

SALEM, OREGON

Date Started 9-16-10 Completed 10-6-10

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number 1873 Date 10-4-10

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1873 Date 10-4-10

Signed _____

Contact Info. (optional) _____

RECEIVED

FEB 25 2011

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☒ Rotary Air☐ Rotary Mud☐ Auger☐ Cable ☐ Cable Mud☐ Reverse Rotary ☐ Other _____

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BORE HOLE

SEAL

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10	0	22	Seal	22	0	16 Sacks
6	22	79				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☐ Other packed from top

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

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Casing	Liner	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		6"	+	1	79	250	X			X
	X	4 1/2"	0	79	54	40		X	X	

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) NONETemporary casing ☐ Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method (casing perforator) (Liner y/saw)
Screens Type _____ Material _____

Perf	Scrn	Casing	Liner	Screen Dia	From	To	Screen slot width	Slot length	# of slots	Tele/ pipe size
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Existing Well/Pre-Alteration				
Completed Well	10-6-10			31

Flowing Artesian? ☐ Yes Dry Hole? ☐ YesWATER BEARING ZONES Depth water was first found 61 bgs

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
10-6-10	61	79	89gpm			31

(11) WELL LOG

Ground Elevation 700'

Material	From	To
Brown Clay	0	16
Gray Claystone	16	79
RECEIVED		
NOV 05 2010		
WATER RESOURCES DEPT		
SALEM, OREGON		

Date Started 9-16-10 Completed 10-6-10

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License Number 1873 Date 10-4-10Signed Eric Webb

Contact Info. (optional) _____