

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

COOS  
672

COOS 672  
JAN 20 1993

29S/15W/25a

WATER RESOURCES DEPT. (START CARD) # 42930

(1) OWNER: Well Number SALEM, OREGON  
Name Howard Hoffer  
Address 879 Donnelly Ave  
City Coos Bay State OR Zip 97420

(2) TYPE OF WORK:  
 New Well  Deepen  Recondition  Abandon

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  
 Other

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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 54'3"  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount (sacks or pounds)
Diameter	From	To	Material	From	To	
9	0	20	Bent	20	0	7 1/2
7	20	54'3"				

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

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from 20 ft. to 54'3" ft. Size of gravel Rec gravel

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 4 1/2	12	34'9"	SDR16	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_  
 Screens Type Hydrophilic Material P.V.C

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
34'9"	54'3"	10/10		4 1/2	4 1/2	<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
32		54'3"	1 hr.

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 WM.  
Section 25 SW 1/4 NE 1/4  
Tax Lot 401 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Rt 1 Box 1038  
bandon

(10) STATIC WATER LEVEL:  
25' ft. below land surface. Date 12-17-92  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 25'

From	To	Estimated Flow Rate	SWL
25	54'3"	32	25

(12) WELL LOG:

Ground elevation \_\_\_\_\_

Material	From	To	SWL
Brown Sandy Top Soil	0	2	
Brown sand w/clay mixed	2	25	
Brown Sand	25	54'3"	25

Date started 12-16-92 Completed 12-17-92

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.  
Signed \_\_\_\_\_ 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 well construction standards. This report is true to the best of my knowledge and belief.  
Signed Ken Burroughs WWC Number 1381  
Date 1-7-93



Oregon Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem Oregon 97301  
 (503) 986-0900  
 www.oregon.gov/owrd

# Application for Well ID Number

RECEIVED

OCT 20 2022

*Do not complete if the well already has a Well Identification Number.*

**I. OWNER INFORMATION**

OWRD

Current Owner Name (please print): Emily L Catlin  
 Mailing Address: PO BOX 2053  
 City, State, Zip: Bandon, OR 97411  
 Mail Well ID to:  SAME AS ABOVE  In Care Of (C/O)  
 Name & Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_

**II. WELL LOCATION INFORMATION** (Please fill out as completely as possible)

Township: 29 S (North / South) Range: 15 W (East / West) Section: 25 SW 1/4 of the NE 1/4  
 Tax Lot (usually last 3-5 numbers of Tax Map #): 401 County Coos  
 GPS Coordinates: Latitude: 43.03408566 Longitude: -124.42053117  
 Street Address of Well, City: 47870 Highway 101  
 If the property had a different street address in the past: \_\_\_\_\_

**III. GENERAL WELL INFORMATION** (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation, pond maintenance (cranberries)  
 Date Well Constructed (or property built): 12-17-92 Total Well Depth: 54' Casing Diameter: \_\_\_\_\_  
 Owner at time the well was constructed (if known): Howard Hoffer Well Report # (if known): COOS 672  
 Other Information: Water Right Certificate # 96006

SUBMITTED BY (please print): Emily L Catlin  
 PHONE: 720-660-0662 EMAIL &/or FAX: bradlycatlin@yahoo.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.  
 Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:  
10-20-22

Well Report Number:  
COOS 672

Well Identification #:  
L-149808