CROO 50071

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MAY 13 1996
WATER RESOURCES DEPT.
SALEM, OREGON

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

(START CARD) # 71907

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

(1) OWNER: Well Number 778

Name Earl Lawver

Address 486 Sally Way

City Eugene State Oregon Zip 97404

(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 660 ft.

Explosives used ☐ Yes ☑ No Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
12	0	18½	Bentonite	0	18½	15
8	18½	660				

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:	8	+1½	18½	250	☑	☐	☑	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
12	Unknown	660	1 hr.

Temperature of water 69 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 Lane Latitude ____ Longitude ____

Township 16 N or (S) Range 16 (E) or W. WM.

Section 22 SW 1/4 NE 1/4

Tax Lot 3700 Lot ____ Block ____ Subdivision ____

Street Address of Well (or nearest address) Commanche

(10) STATIC WATER LEVEL:

580 ft. below land surface. Date 2-19-96

Artesian pressure ____ lb. per square inch. Date ____

(11) WATER BEARING ZONES:

Depth at which water was first found 580

From	To	Estimated Flow Rate	SWL
580	660	12 +	580

(12) WELL LOG:

Ground Elevation ____

Material	From	To	SWL
Top Soil	0	3	
Yellow clay Stone	3	10	
Gray Basalt	10	153	
Sand Stone	153	168	
Gray Basalt with Brown clay Seams	168	443	
Brown clay Stone	443	451	
Black & Gray Basalt Yellow clay Seams	451	660	

Date started 2-12-96 Completed 2-19-96

(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 584

Signed David Maples Date 2-28-96

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER