

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

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

(1) OWNER:

Well Number 501

Name Alex Ellis
Address PO Box 41
City Port Orford State OR Zip 97465

(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 69' 8"
Explosives used ☐ Yes ☒ No Type _____ Amount 100

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	68	Bentonite	0	20	22 SK

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Poured from surface

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 20 ft. to 68 ft. Size of gravel 10/20

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6"	+1' 8"	4' 10"	10	☐	☒	☒	☐
	6"	62' 2"	63'	160	☐	☒	☒	☐
	(TRAIL PIPE)				☐	☐	☐	☐
	8"	+1' 10"	4'	250	☒	☐	☐	☐
Liner:	(Protective Casing)				☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

	From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
☐ Perforations							☐	☐
☒ Screens							☐	☐
	4' 10"	62' 2"	10/20		6"	pipe	☐	☐
							☐	☐
							☐	☐
							☐	☐
							☐	☐

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

☒ Pump	☐ Bailer	☐ Air	☐ Flowing
Yield gal/min	Drawdown	Drill stem at	Time
71	14'	63	1 hr.
71	14' 5"	63	2 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 Curry Latitude _____ Longitude _____
Township 31 N or S Range 15 E or W WM.
Section 32 NW 1/4 SW 1/4
Tax Lot 2200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Airport Road
St. James

(10) STATIC WATER LEVEL:

18' 2" ft. below land surface. Date 6/25/97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 18' 2"

From	To	Estimated Flow Rate	SWL
18' 2"	60'	+/- 150 GPM	
Specific Cap	4.91 Gal/FT of DD		

(12) WELL LOG:

Ground Elevation +/- 300'

Material	From	To	SWL
Topsoil	0	5	
Sandy Clay Brown	5	10	
Sand Fine Brown	10	12	
Sandy Clay tan w/ Fine	12	15	
Gravel			
Gravel Fine-Med w/	15	25	
Sand CRS-Fine Gray Ben			
Sand CRS-Fine w/	25	38	
Gravel Fine BEN			
Gravel CRS-Fine w/ Sand	50	60	
CRS-Fine Black w/ Shell			
Clay Gray w/ Gravel	60	64	
Sandy Clay Gray Green	64	68	

RECEIVED

JUL 18 1997

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 6/25/97 Completed 7/14/97

(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 Borden 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 Jan Madsen Jr. Madsen WWC Number 1493
Date 7/14/97