

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.

WELL I.D. # L ~~71996~~

START CARD #

169246

(1) LAND OWNER _____ Well Number _____
 Name Mark Neuner
 Address 3505 Malibu County Drive
 City Malibu, State Ca Zip 90265

(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 160 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10 1/2"	0	22	Bentonite	0	22	10
6"	22	160				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Poured Dry
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:					Plastic	Welded	Threaded
	Diameter	From	To	Gauge Steel			
Casing:	6"	+1	72	.280 ☒	☐	☒	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
Liner:				☐	☐	☐	☐
				☐	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☒ None

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
 Yield gal/min Drawdown ~~xxx~~ Drill stem at Artesian

Yield gal/min	Drawdown	Drill stem at	Time
1		160	1 hr.

Temperature of water 51 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 38S N or S Range 14W E or W. W.M
Section 29 C 1/4 C 1/4
Tax Lot 502 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 23810 Hwy 101
Gold Beach, Oregon

(10) STATIC WATER LEVEL:
63 ft. below land surface. Date 5/12/05
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 67'

From	To	Estimated Flow Rate	SWL
67'	68'	1	63

(12) WELL LOG:
Ground Elevation _____

[illegible]

Date started 5/11/05 Completed 5/12/05

(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.

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 water supply well construction standards. This report is true to the best of my knowledge and belief

Signed  WWC Number 709
Date 5/30/05

SCALE 1:4800



SW 1/4 Sec. 29 T38S. R.14W. W.M.

CURRY COUNTY

1"=200'

38 14 700

KILOMETER

SEE MAP 38 14

SEE MAP 38 14

SEE MAP 38 14

CANCELLED NO.
303

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Made Planner
3505 Madia County Ia
Melba, Ia 50365

RECEIVED
JUN 02 2005
WATER RESOURCES DEPT
SALEM, OREGON

Address 23810 Hwy 101

RELOCATED

OREGON COAST

HIGHWAY

HIGHWAY

OREGON

16-1

TAX LOT
502

REG
JEN

L