

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

WELL I.D. # L 60653  
START CARD # 142830

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

(1) OWNER: Well Number \_\_\_\_\_  
Name Cascade Meadows Rv. Park  
Address Paula Lk Jct.  
City Lebanon State OR Zip 97239

(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 40 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
<u>12'</u>	<u>0</u>	<u>40</u>	<u>Bent.</u>	<u>0</u>	<u>18</u>	<u>12</u>

How was seal placed: Method  A  B  C  D  E  
 Other Poured  
Backfill placed from 18 ft. to 30 ft. Material native  
Gravel placed from 30 ft. to 40 ft. Size of gravel 1/2-3/4

Casing:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	<u>4"</u>	<u>11</u>	<u>30</u>	<u>160</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input 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 \_\_\_\_\_ Material P.V.C.

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>30</u>	<u>40</u>	<u>.015</u>	<u>3500</u>			<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing
Yield gal/min	Drawdown	Drill stem at	Artesian Time
<u>15</u>	<u>1'</u>		<u>1 hr.</u>

Temperature of water 47° 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 Desch Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 21  N or S Range 11  E or W. WM.  
Section 18 SE 1/4 SW 1/4  
Tax Lot 802 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Home 53750 Hwy 997 Paulina Lk Jct.

(10) STATIC WATER LEVEL:  
17 ft. below land surface. Date 9-16-02  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
<u>17</u>	<u>40</u>	<u>40 GPM</u>	

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
<u>Soil + Pumice</u>	<u>0</u>	<u>4</u>	
<u>Clay + Gravel</u>	<u>4</u>	<u>17</u>	
<u>Coarse B/K Sand</u>	<u>17</u>	<u>40</u>	<u>17</u>

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NOV 18 2002

WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 9-1-02 Completed 9-2-02

(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 1523  
Signed Steve Walker Date 9-16-02