## STATE OF OREGON WATER WELL REPORT

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(START CARD) (as required by ORS 537.765) Well Number: VISTER REC (9) LOCATION OF WELL by legal description: (1) OWNER: ြင္သက္ Douglas Douglas County Parks Dept. SALE Name Address P.O. Box 800 E or W. WM. Township. 97495 City Winchester State Section (2) TYPE OF WORK: Subdivision Old School House Deepen Recondition Abandon Street Address of Well (or nearest address) ☐ New Well Mildred Kanipe Memorial Park, Oakland (3) DRILL METHOD (10) STATIC WATER LEVEL: X Rotary Air ☐ Rotary Mud ☐ Cable Other . ft\_below land surface. (4) PROPOSED USE: Artesian pressure \_ lb. per square inch. \* Domestic ☐ Community ☐ Industrial ☐ Irrigation (11) WATER BEARING ZONES: ☐ Injection Other ☐ Thermal Depth at which water was first found (5) BORE HOLE CONSTRUCTION: Depth of Completed Well 145 ft. SWL  ${\bf Special\ Construction\ approval} \quad \underline{\bf Yes}$ From **Estimated Flow Rate** No X 40 41 14 Туре Explosives used \_ Amount 101 14 100 SEAL Amount Diameter From To Material To From sacks or pounds 25 Bentonite (12) WELL LOG: 140 Ground elevation Material From То SWL 20 Soft Brown Clay  $\Box$  c  $\Box$  p 20 31 Soft Blue Claystone Poured Dry 145 14 31 Blue Claystone Backfill placed from \_\_\_\_ ft. to . Material Gravel placed from \_ ft. to Size of gravel (6) CASING/LINER: Diameter . From Welded Threaded (Old casing removed) To Gauge Steel Plastic .25 X X 145 Š Ø Final location of shoe(s) (7) PERFORATIONS/SCREENS: Perforations Method ☐ Screens Material Type Slot Tele/pipe Number, Diameter From Casing Liner П 6-26-90 6-26-90 Completed (unbonded) Water Well Constructor Certification: (8) WELL TESTS: Minimum testing time is 1 hour I certify that the work I performed on the construction, alteration, or Flowing abandonment of this well is in compliance with Oregon well construction ⊠ Air Artesian ☐ Bailer ☐ Pump standards. Materials used and information reported above are true to my best Yield gal/min Drawdown Drill stem at Time knowledge and belief. WWC Number 145 6 1 hr. Signed Date . (bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment Depth Artesian Flow Found Temperature of water 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. Yes By whom Was a water analysis done? Did any strata contain water not suitable for intended use? 

Too little belief. ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other. WWC Number Date \_6-27-90 Depth of strata: Signed



O R E G O N Oregon Water Resources Department 725 Summer Street NE, Suite A Salem Oregon 97301 (S03) 986-0900 WATER RESOURCES DEPARTMENT www.oregon.gov/owrd

## **Application for Well ID Number**

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

APR 26 2024

I. <u>OWNER INFORMATION</u>
Current Owner Name (please print): Douglas County Parks
Mailing Address: 1036 SE Douglas Ave. Rm 116
City, State, Zip: Roseburg, OR 97470
Mail Well ID to: SAME AS ABOVE In Care Of (C/O)
Name & Address: Tag # L 115367 was attached by Well Inspector - no packet necessary!
City, State, Zip:
II. WELL LOCATION INFORMATION (Please fill out as completely as possible)  Township: 24 S (North / South) Range: 4 W (East / West) Section: 19 NW 1/4 of the NW 1/4  Tax Lot (usually last 3-5 numbers of Tax Map #): 300 County Douglas  GP5 Coordinates: Lat: 43.472275 Lon: -123.224068  Street Address of Well, City: 17455 Elkhead Rd (per county)  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):  Domestic
Use of Well (domestic, irrigation, commercial, industrial, monitoring): Domestic  Date Well Constructed (or property built): Reconditioned (6-26-90) Total Well Depth: 145' Casing Diameter: 6"  Owner at time the well was constructed (if known): Douglas County Parks Well Report # (if known): DOUG 57
Owner at time the well was constructed (if known): Douglas County Parks  Well Report # (if known): DOUG 57
Other Information:
SUBMITTED BY (please print): Bobby Buckmister, SWR Well Inspector  PHONE: 541-218-5122  EMAIL &/or FAX: Bob.N.Buckmister@water.oregon.gov  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: Well Report Number: Well Identification #: 4-26-2024 DOUG 57 L-115367