

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

DOUG
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DOUG 9801 JUL 24 1987

325/5W-30a

WATER RESOURCES DEPT.

(1) OWNER: Well Number: _____
 Name M. Darrow Wood RV Resort / Smith
 Address 842 Autumn Ln
 City Wendle State OR Zip 97442

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 125 ft.
 Yes No
 Explosives used Type _____ Amount _____

| HOLE | | | SEAL | | Amount | |
|-------|------|-----|----------|------|--------|-----------------|
| meter | From | To | Material | From | To | sacks or pounds |
| 0" | 0 | 20 | cmst | 0 | 20 | 13 sacks |
| 6" | 20 | 125 | | | | |

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: 6" | 1 | 124 | 0.25 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| Liner: | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Location of shoe(s) _____

PERFORATIONS/SCREENS:

Perforations Method touch
 Screens Type _____ Material _____

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|-----|-----------|--------|----------|----------------|-------------------------------------|--------------------------|
| 74 | 76 | 6 | 8 | 1/4 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 85 | 88 | 6 | 12 | 1/4 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| 102 | 105 | 6 | 12 | 1/4 | | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 18 Drawdown _____ Drill stem at 124 Time 1 hr.

Temperature of water 53° 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 DOUGLAS Latitude _____ Longitude _____
 Township 32 N or S, Range 5 E or W, WM.
 Section 30 NE 1/4 NE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) D.A.M.U.

(10) STATIC WATER LEVEL:
10' ft. below land surface. Date 6/24/87
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 50'

| From | To | Estimated Flow Rate | SWL |
|------|------|---------------------|-----|
| 50' | 125' | | 10' |

(12) WELL LOG: Ground elevation _____

| Material | From | To | SWL |
|--------------------|------|-----|-----|
| Brown clay | 0 | 3 | |
| Decomp. granite | 3 | 7 | |
| Decomp. Brown clay | 7 | 125 | 10 |

Date started 6-24-87 Completed 6-24-87

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed James S. Sublette WWC Number 1324
 Date 7-17-87

(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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed P. Keith Coleman WWC Number 643
 Date 6-26-87