

NOV 20 1997

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

WATER RESOURCES DEPT.
SALEM, OREGON

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

gran

50131

WELL I.D.# 604059

(START CARD) # 89499

(1) OWNER:

Well Number _____

Name T.G. + Sandra BrownAddress HC 84 Box 730City Lanyon City State Or Zip 97820

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

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	19	Bentonite	0	19	8 Sacks
6"	19	254				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other Pour

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"	0	19	250	☒	☐	☒	☐
Liner: N/A				☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ PerforationsMethod N/A☐ Screens

Type _____

Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
N/A						☐	☐

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

☐ Pump☐ Bailer☒ Air☐ Flowing
Artesian

Yield gal/min	Drawdown	Drill stem at	Time
60	196	254	1 hr.

Temperature of water 56 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 Grant Latitude _____ Longitude _____Township 18 N or S Range 28 E or W. WM.Section 14 NW 1/4 SE 1/4Tax Lot 302 Lot _____ Block _____ Subdivision _____Street Address of Well (or nearest address) County Rd 68South Lane 6 miles

(10) STATIC WATER LEVEL:

30 ft. below land surface.Date 9-15-97

Artesian pressure _____ lb. per square inch.

Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 192

From	To	Estimated Flow Rate	SWL
192	196	60	30

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Hard tan clay	0	5	
Brown broken rock	5	12	
gray Basalt Hard	12	40	30
Brown Basalt Hard	40	53	
gray Basalt Hard	53	56	
Brown Basalt Hard	56	88	
Brown Basalt M Hard	88	119	
gray Basalt Hard	119	135	
Brown Basalt Hard	135	156	
gray Hard Sandstone	156	158	
Brown Hard Shale rock	158	192	
Brown Shale Fractured	192	196	water
Brown Shale rock Hard	196	204	
gray Sandstone Hard	204	212	
gray + green mix Sand	212	220	
stone Hard			
Brown rock Hard	220	222	
gray Sand Stone Hard	222	240	
Brown Basalt Hard	240	254	

Date started 9-9-97 Completed 9-10-97

(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.

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 1606Signed John MarcellDate 10-10-97