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STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

APR 19 2002

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

(1) LAND OWNER

Name Lee Davies
 Address P.O. Box 3095
 City Princeton State OR Zip 97221

(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 140 ft.

Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
20	0	18	Bestote			
			+ Cement	0	18	325 sacks
16	18	120				
12	120	140				

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: 16	0	32	288	☒	☐	☒	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
Liner:				☐	☐	☐	☐
				☐	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☒ None

Final location of shoe(s) 37

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☐ Screens Type _____ Material _____

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From	To	Number	Diameter	Tele/pipe size	Casing	Liner
0	32				☐	☐
32	44				☐	☐
44	72				☐	☐
72	94				☐	☐
94	108				☐	☐
108	120				☐	☐
120	138				☐	☐
138	140				☐	☐

WATER RESOURCES DEPT

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing
☐ Artesian

Yield gal/min	Drawdown	Drill stem at	Time
2500	96	140	3 hr.

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Depth Artesian Flow Found _____

Was a water analysis done? ☒ No ☐ Yes By whom _____

Drinking water not suitable for intended use? ☒ No ☐ Too little
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

WATER RESOURCES DEPT

SALEM, OREGON

WELL I.D. # L51621START CARD # 128271

(9) LOCATION OF WELL by legal description:

County Harn Latitude _____ Longitude _____
 Township 22S N or S Range 34E E or W. WM.
 Section 12 NW 1/4 NE 1/4
 Tax Lot 60 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) MP 45 Hy 28
Princeton Ore 97221

(10) STATIC WATER LEVEL:

44 ft. below land surface. Date 4-1-02

Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 72

From	To	Estimated Flow Rate	SWL
72	94	1000	44
108	120	1000	44
125	138	500	44

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Top Soil	0	6	-
Brown clay	6	32	
Vesicular Brown			
Basalt	32	44	
Hard Grey			
Basalt	44	72	
Vesicular			
Brown Red			
Black Basalt (w/)	72	94	44
Hard Grey Basalt	94	108	44
Vesicular Red			
Brown Basalt	108	120	44
Hard Grey Basalt	120	125	44
Vesicular Brown			
Basalt w/ white clay	125	138	44
Hard Grey Basalt	138	140	44

Date started 3-23-02 Completed 4-1-02

(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 4-1-02

Signed Ronald W. Lee Date 1521