

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

WELL I.D. # L 52439
START CARD # 149476

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

(1) LAND OWNER: Well Number _____
Name Robert Congill
Address 71709 Turnout RD.
City Burns State Oregon Zip 97720

(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 153 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
11"	0	20	Bentonite	0	20	35
10"	20	118				

How was seal placed: Method A B C D E
 Other Paired

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Casing:	Diameter	From	To	Gauge	Steel			
					Plastic	Welded	Threaded	
	10"	41	118	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
100	20'	100'	1 hr.

Temperature of water 54° Depth Artesian Flow Found _____
Was a water analysis done? No Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: 5'

(9) LOCATION OF WELL by legal description:
County Clatsop Latitude _____ Longitude _____
Township 35 N or S Range 33 E or W. WM.
Section 36 SW 1/4 NE 1/4
Tax Lot 9700 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) 55328 Hwy 28 Burns Or 97720

(10) STATIC WATER LEVEL:
65 ft. below land surface. Date 3-19-05
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 65'

From	To	Estimated Flow Rate	SWL
65	70	20 GPM	65'
120	153	60 GPM	65'

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Sand & silt	0	3'	
Rock & Braking rock	3'	65'	65'
Sandy Clay	65'	85'	
Sand Stone	85'	120'	65'
White Sand & gravel	120'	153'	65'

RECEIVED

APR 06 2005

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 2-18-05 Completed 3-19-05

(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.
Signed _____ WWC Number _____ 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.
Signed Kenneth E. Smith WWC Number 1752 Date 4-2-05