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375 1W 28A D

\* AMENDED - REWRITTEN LOG

Jack 50700

WELL .D.# L10064

NOV 12 1996

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

WATER RESOURCES DEPT. SALEM, OREGON

(START CARD) # 75043

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

(1) OWNER: Well Number \_\_\_\_\_ Name Roy Staton

Address 20055 Hwy 62 #10 City Shady Cove State OR Zip 97539

(2) TYPE OF WORK [X] New Well [ ] Deepening [ ] Alteration (repair/recondition) [ ] Abandonment

(3) DRILL METHOD: [X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Other

(4) PROPOSED USE: [X] Domestic [ ] Community [ ] Industrial [ ] Irrigation [ ] Thermal [ ] Injection [ ] Livestock [ ] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [ ] Yes [X] No Depth of Completed Well 20 ft. Explosives used [ ] Yes [X] No Type \_\_\_\_\_ Amount \_\_\_\_\_

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Row 1: 10", 0, 18, Bentonite, 0, 18, 22 Sacks. Row 2: 6", 18, 20.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E [X] Other pour Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 6", +1, 40, 250, [X], [ ], [X], [ ]. Liner: 4", 0, 260, 160, [ ], [X], [X], [ ].

\* Final location of shoe(s) 40

(7) PERFORATIONS/SCREENS: [X] Perforations Method SKIL SAW [ ] Screens Type \_\_\_\_\_ Material \_\_\_\_\_ Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: 240, 260, 1/8, 40, 6", 4", [ ], [X].

(8) WELL TESTS: Minimum testing time is 1 hour. [ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian. Yield gal/min 30 GPM Drawdown \_\_\_\_\_ Drill stem at 240 Time 1 hr.

\* Temperature of water 49° 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 Jackson Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Township 34 N or S Range 1 E or WWM. Section 28 SE 1/4 NE 1/4 Tax Lot 101 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ Street Address of Well (or nearest address) 26 Brophy Ln Shady Cove

(10) STATIC WATER LEVEL: \* 78 ft. below land surface. Date 10-11-96 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES: Depth at which water was first found 235'

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 235, 245, 306 gpm, 781'

(12) WELL LOG: Ground Elevation \_\_\_\_\_

Table with columns: Material, From, To, SWL. Row 1: CLAY + GRAVELS, 0, 11. Row 2: Clay Stone, 11, 260, 78'.

Date started 10-8-96 Completed 10-11-96 (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 \_\_\_\_\_ Date \_\_\_\_\_ WWC Number \_\_\_\_\_

(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 Danny J. Omben Date 11-6-96 WWC Number 1535

\* ORIGINAL SUBMITTED LOG

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T345/R1W/28

WELL .D.# L10064

OCT 28 1996

(START CARD) # 75043

STATE OF OREGON WATER SUPPLY WELL REPORT

JACK 50700

WATER RESOURCES DEPT.

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

SALEM, OREGON

(1) OWNER: Well Number \_\_\_\_\_ Name Roy Staton Address 2055 Hwy 62 #10 City Shady Cove State OR Zip 97537

(9) LOCATION OF WELL by legal description: County Jackson Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ Township 34 N or S Range 1 E or W. WM. Section 28 1/4 1/4 Tax Lot 101 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_ Street Address of Well (or nearest address) 26 Dropsy LN Shady Cove

(2) TYPE OF WORK [X] New Well [ ] Deepening [ ] Alteration (repair/recondition) [ ] Abandonment

(10) STATIC WATER LEVEL: 30 ft. below land surface. Date 10-10-96 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(3) DRILL METHOD: [X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Other

(11) WATER BEARING ZONES: Depth at which water was first found 235'

(4) PROPOSED USE: [X] Domestic [ ] Community [ ] Industrial [ ] Irrigation [ ] Thermal [ ] Injection [ ] Livestock [ ] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [ ] Yes [X] No Depth of Completed Well 260 ft. Explosives used [ ] Yes [X] No Type \_\_\_\_\_ Amount \_\_\_\_\_

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds. Row 1: 10", 0, 18, Bentonite, 0, 18, 20 Sacks. Row 2: 6", 18, 260.

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 235, 250, 30 Gpm.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E [X] Other pour Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(12) WELL LOG: Ground Elevation \_\_\_\_\_

Table for CASING/LINER with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 6", 1, 56, 250. Liner: 4", 0, 260, 160.

Table for WELL LOG with columns: Material, From, To, SWL. Row 1: Sand GRAVELS, 0, 11. Row 2: Clay Stone, 11, 260, 30'.

(7) PERFORATIONS/SCREENS: [X] Perforations Method SKILSAW [ ] Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Table for PERFORATIONS/SCREENS with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: 240, 260, 1/8, 40, 6", 4".

Date started 10-8-96 Completed 10-10-96

(8) WELL TESTS: Minimum testing time is 1 hour [ ] Pump [ ] Bailer [X] Air [ ] Artesian Yield gal/min Drawdown Drill stem at Time 30' 240" 1 hr.

(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 \_\_\_\_\_

Temperature of water 50° 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: \_\_\_\_\_

(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 1535 Signed Denny J. Decker Date 10-23-96