

STATE OF OREGON  
WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 113564

START CARD # 210216

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

**(1) LAND OWNER** Owner Well I.D.  
First Name CRAIG Last Name ARMSTRONG  
Company \_\_\_\_\_  
Address 2080 ANTELOPE RD PMB #393  
City WHITE CITY State OR Zip 97503

**(2) TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (repair/recondition)  Abandonment

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

**(4) PROPOSED USE**  Domestic  Irrigation  Community  
 Industrial/Commercial  Livestock  Dewatering  Injection  
 Thermal  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard:  Yes (attach copy)  
Depth of Completed Well 172' ft.

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amount	Scks/lbs
10"	0	18'	BENTONITE	0	18'		12sck
6"	18'	172'					

How was seal placed: Method  A  B  C  D  E  
 Other BENTONITE (PULVERIZED DRY)  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(6) CASING/LINER**

Csng	Lnr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
<input checked="" type="checkbox"/>		6"	+1	21'	250		<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	
	<input checked="" type="checkbox"/>	4"	0	172'	160			<input checked="" type="checkbox"/>		

Shoe  Inside  Outside  Other Location of shoe(s) 21'  
Temporary casing  Yes Diameter \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
Perforations Method SAW  
Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf	Scrn	Csng	Lnr	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>		50'	172'	18	8"	16	4"	

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 34 gpm Drawdown 110' Drill stem/Pump depth \_\_\_\_\_ Duration (hr) 1hr

Temperature 53 °F Lab analysis  Yes By \_\_\_\_\_  
Water quality concerns?  Yes (describe below)

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**  
County JACKSON Twp 35 N or S Range 2W E or W W.M.  
Sec 13 NW 1/4 of the SE 1/4 Tax Lot 1200  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Street Address of Well (or nearest address) 3960 Dodge Rd  
WHITE CITY OR 97503

**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Predeepening				
Completed Well	<u>Aug 10, 2014</u>			<u>20'</u>

Flowing Artesian?  Yes Dry Hole?  Yes

**WATER BEARING ZONES** Depth water was first found 40'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>Aug 10, 2014</u>	<u>40'</u>	<u>42'</u>	<u>3 gpm</u>			<u>20'</u>
<u>Aug 10, 2014</u>	<u>155'</u>	<u>160'</u>	<u>31 gpm</u>			<u>20'</u>

**(11) WELL LOG** Ground Elevation \_\_\_\_\_

Material	From	To
<u>SOIL (BROWN)</u>	<u>0</u>	<u>4'</u>
<u>CLAYSTONE (GREEN)</u>	<u>4'</u>	<u>9'</u>
<u>CLAYSTONE (BLUE)</u>	<u>9'</u>	<u>172'</u>

RECEIVED BY OWRD  
AUG 25 2014  
SALEM, OR

Date Started Aug 4, 2014 Completed Aug 10, 2014

**(unbonded) Water Well Constructor Certification**  
I certify that the work I performed on the construction, deepening, 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.

License Number \_\_\_\_\_ Date \_\_\_\_\_  
Signed \_\_\_\_\_

**(bonded) Water Well Constructor Certification**  
I accept responsibility for the construction, deepening, 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.

License Number 1705 Date Aug 10, 2014  
Signed Scott Coff  
Contact Info. (optional) \_\_\_\_\_