STATE OF OREGON

Did any strata contain water not suitable for intended use?

Depth of strata: _

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _

46589 WELL I.D. # L_ WATER SUPPLY WELL REPORT START CARD # 137878 (as required by ORS 537.765) Instructions for completing this report are on the last page of this form. (1) LAND OWNER (9) LOCATION OF WELL by legal description: Well Number Name Oregon Dept of Transportation County Joseph Latitude _____ _Longitude_ Township 35 S 06 W Address 3500 NW Stewart Parkway _N or S Range_ E or W. WM. Zip 97470 Roseburg Section 24 Se NW 1/4 1/4 Tax Lot 201 Lot __ (2) TYPE OF WORK __Block _ _Subdivision □ New Well □ Deepening 🔀 Alteration (repair/recondition) □ Abandonment Street Address of Well (or nearest address) Manzanita Rest Area (3) DRILL METHOD: ☐ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger (10) STATIC WATER LEVEL: N/A N/A ft. below land surface. ☐ Other_ Date Artesian pressure ___ _lb. per square inch (4) PROPOSED USE: ☐ Domestic XI Community ☐ Industrial ☐ Irrigation (11) WATER BEARING ZONES: ☐ Livestock ☐ Other_ ☐ Thermal ☐ Injection N/A Depth at which water was first found __ (5) BORE HOLE CONSTRUCTION: Special Construction approval ☐ Yes XNo Depth of Completed Well N≠At. To **Estimated Flow Rate** From SWL Explosives used YesXXNo Type_ _Amount. N/A SEAL HOLE From To Sacks or pounds Diameter From Material N/A N/A(12) WELL LOG: How was seal placed: Method \square B \square C \square D \square E Ground Elevation . N/A [] Other Material From SWL - ft. Material Backfill placed from _ ft. to Size of gravel Added 6' of well ft Gravel placed from ft to casing to existing (6) CASING/LINER: Gauge Steel Welded Threaded well to bring Diameter From 8 <u>-3</u> 250 X \mathbf{X} above grade. Casing: _ [] \Box Liner: N/A Drive Shoe used ☐ Inside ☐ Outside ☒None Final location of shoe(s)_ N/A(7) PERFORATIONS/SCREENS: ☐ Perforations Method_ WATER RESOURCES DEPT ☐ Screens Type Material Tele/pipe Slot SALEM, OREGO To Number Diameter Casing Liner From size size N/A 12/4/00 12/4/00 Date started Completed (8) WELL TESTS: Minimum testing time is 1 hour Flowing (unbonded) Water Well Constructor Certification: ☐ Bailer ∏ Air ☐ Artesian Pump I certify that the work I performed on the construction, alteration, or abandon-Yield gal/min Drawdown Drill stem at Time ment of this well is in compliance with Oregon water supply well construction 1 hr. standards. Materials used and information reported above are true to the best of my N/Iknowledge and belief. wwc Number 1687 Signed Date 12/4/00 (bonded) Water Well Constructor Certification: N/A Depth Artesian Flow Found Temperature of water___ I accept responsibility for the construction, alteration, or abandonment work Was a water analysis done? ☐ Yes By whom . 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 helief.

WWC Number

Date 12/4/00

☐ Too little