

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

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

(WELL I.D.)# L 64273

(START CARD) # 157711

(1) OWNER: Well Number \_\_\_\_\_  
Name **DAVID MAHONEY**

Address **5345 WEST SIDE ROAD**  
City **CAVE JUNCTION** State **OR** Zip **97526**

**(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 350 ft.  
Explosives used ☐ Yes ☒ No Type \_\_\_\_\_ Amount \_\_\_\_\_

| HOLE     |      |     | SEAL      |      |    |                 |
|----------|------|-----|-----------|------|----|-----------------|
| Diameter | From | To  | Material  | From | To | Sacks or pounds |
| 10"      | 0    | 18  | BENTONITE | 0    | 18 | 8 SACKS         |
| 6"       | 18   | 350 |           |      |    |                 |
|          |      |     |           |      |    |                 |

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☒ Other **POURED**

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:           | 6"       | +2   | 18  | .250  | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|                   |          |      |     |       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> |
|                   |          |      |     |       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> |
|                   |          |      |     |       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> |
| Liner:            | 4"       | 0    | 319 |       | <input type="checkbox"/>            | <input checked="" type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
|                   |          |      |     |       | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/>            | <input type="checkbox"/> |

Final location of shoe(s) **18'**

[illegible]

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

|                               |                                 |                                         |                                              |
|-------------------------------|---------------------------------|-----------------------------------------|----------------------------------------------|
| <input type="checkbox"/> Pump | <input type="checkbox"/> Bailer | <input checked="" type="checkbox"/> Air | <input type="checkbox"/> Flowing<br>Artesian |
| Yield gal/min                 | Drawdown                        | Drill stem at                           | Time                                         |
| 3 GPM                         |                                 | 300'                                    | 1 hr.                                        |
|                               |                                 |                                         |                                              |

Temperature of water 56 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 JOSEPHINE Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 39 S Range 08 W WM.  
Section 29 NW 1/4 NW 1/4  
Tax Lot 700 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) **5345 WEST SIDE ROAD**

**(10) STATIC WATER LEVEL:**

|                                              |                           |
|----------------------------------------------|---------------------------|
| <b>11</b> _____ ft. below land surface.      | Date <b>8/01/03</b> _____ |
| Artesian pressure _____ lb. per square inch. | Date _____                |

(11) **WATER BEARING ZONES:**

Depth at which water was first found **179'**

| From | To  | Estimated Flow Rate | SWL |
|------|-----|---------------------|-----|
| 179  | 315 | 3 GPM               | 11  |
|      |     |                     |     |
|      |     |                     |     |
|      |     |                     |     |
|      |     |                     |     |

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

[illegible]

Date started **7/31/03** Completed **8/1/03**

**(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 Steven Carter WWC Number 1659  
Date 8/1/03

**(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 Bob Quinn WWC Number 675 Date 8/1/03