

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

12
LAKE
4564

355/19E/186
74282

(START CARD) #

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

(1) OWNER: Well Number 2

Name ZX RANCH
Address PO Box 7 Paisley
City PAISLEY State OR Zip 97263

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

HOLE		SEAL			
Diameter	From To	Material	From To	Sacks or pounds	
8 1/2"	0 388'	CEMENT	0 20'	30 SACKS	

How was seal placed: Method A B C D E
 Other _____
Backfill placed from 20 ft. to 388 ft. Material _____
Gravel placed from 20 ft. to 388 ft. Size of gravel 3/8"

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 16"	+1	20'	260	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 14"	0	388'	188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS:

Perforations Method FACTORY
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
28'	328'	1/8"	8,120	4x6"	14"	<input type="checkbox"/>	<input checked="" type="checkbox"/>
368'	388'	1/8"	1,000	1/8x6"	14"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
1850	60'	120'	1 hr.

Temperature of water 62° 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: _____

(9) LOCATION OF WELL by legal description:

County LAKE Latitude _____ Longitude _____
Township 33.5 N or Range 19 or W. WM.
Section 18 SE 1/4 NW 1/4
Tax Lot 500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) FREED YARD
ACCA

(10) STATIC WATER LEVEL:
13 ft. below land surface. Date 3/19/95
Artesian pressure 0 lb. per square inch. Date 3/19/95

(11) WATER BEARING ZONES:

Depth at which water was first found 26'

From	To	Estimated Flow Rate	SWL
26'	95'	500+	13
135'	211'	1,000+	13
365'	388'	500+	13

RECEIVED

(12) WELL LOG: Ground Elevation APR - 3 1995

Material	WATER FROM	TO	SWL
SAND + GRAVEL	SALEM, OREGON		
BROWN CLAY	6	26	13'
SAND + 3/4" GRAVELS	23	48	
DARK BROWN SAND (CASE)	48	98	
BROWN CLAY	98	103	
3/4" GRAVEL w/SAND	103	131	
BROWN CLAY	131	141	
SAND + GRAVEL	141	176	
BROWN CLAY	176	206	
SAND + GRAVEL 1/4"	206	239	
GRAY CLAY w/ 1/4" GRAVEL	239	251	
FINE SAND + GRAVEL 1/4"	251	271	
GRAY CLAY w/FINE SAND	271	365	
GRAVEL + SAND	365	388	

Date started 3/13/95 Completed 3/19/95

(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 Bill C WWC Number 1555 Date 3/3/95