

# RECEIVED

LAKE

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## 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 report.

WATER RESOURCES DEPT  
SALEM, OREGON

WELL I.D. # 38920  
START CARD # 129627

### (1) OWNER:

Well Number \_\_\_\_\_  
Name LARRY AND TARA GRASSMAN  
Address PO BOX 101  
City CHRISTMAS VALLEY State OREGON Zip 97641

### (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 440 ft.  
Explosives used ☐ Yes ☐ No Type \_\_\_\_\_ Amount \_\_\_\_\_

#### HOLE

#### SEAL

| Diameter | From | To  | Material | From | To | Sacks or pounds |
|----------|------|-----|----------|------|----|-----------------|
| 19"      | 0    | 99  | Lehmert  | 99   | 79 | 10 Sack         |
|          |      |     | Ben      | 59   | 0  | 154 sack        |
| 12 1/4"  | 99   | 440 |          |      |    |                 |

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E  
☐ Other 3/8 hole plug put in

Backfill placed from 79 ft. to 59 ft. Material 3/8 hole plug

Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

### (6) CASING/LINER:

| Diameter    | From | To | Gauge | Steel                               | Plastic                  | Welded                              | Threaded                 |
|-------------|------|----|-------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| Casing: 14" | +    | 99 | 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:      |      |    |       | <input type="checkbox"/>            | <input 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) \_\_\_\_\_

### (7) PERFORATIONS/SCREENS:

☐ Perforations Method \_\_\_\_\_  
☐ Screens Type \_\_\_\_\_ Material \_\_\_\_\_

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing                   | Liner                    |
|------|----|-----------|--------|----------|----------------|--------------------------|--------------------------|
|      |    |           |        |          |                | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |                | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |                | <input type="checkbox"/> | <input type="checkbox"/> |
|      |    |           |        |          |                | <input type="checkbox"/> | <input type="checkbox"/> |

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing  
Yield gal/min \_\_\_\_\_ Drawdown \_\_\_\_\_ Drill stem at \_\_\_\_\_ Time \_\_\_\_\_

Temperature of water 52 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 LAKE Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 27 N or S Range 17 E or W. WM.  
Section 1 SW 1/4 NW 1/4  
Tax Lot 700 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

### (10) STATIC WATER LEVEL:

27 ft. below land surface. Date 5-15-00  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

### (11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

| From | To     | Estimated Flow Rate | SWL |
|------|--------|---------------------|-----|
| 30   | 30 1/2 | 20 gpm              | 27  |
|      |        |                     |     |
|      |        |                     |     |
|      |        |                     |     |

### (12) WELL LOG:

Ground Elevation \_\_\_\_\_

| Material                      | From | To  | SWL |
|-------------------------------|------|-----|-----|
| TOP Soil                      | 0    | 2   |     |
| Brown Clay                    | 2    | 3   |     |
| White Clay                    | 3    | 11  |     |
| Gray Clay                     | 11   | 20  |     |
| Brown Clay                    | 20   | 30  |     |
| Gray Sand                     | 30   | 50  |     |
| Green Clay                    | 50   | 56  |     |
| Green Clay                    | 56   | 65  |     |
| Gray Sand                     | 65   | 76  |     |
| Gray Clay stone               | 76   | 78  |     |
| Blank clay - <del>stone</del> | 78   | 180 |     |
| Gray Clay stone               | 180  | 430 |     |
| Pumice w.B.                   | 430  | 440 |     |
|                               |      |     |     |
|                               |      |     |     |
|                               |      |     |     |
|                               |      |     |     |
|                               |      |     |     |
|                               |      |     |     |
|                               |      |     |     |
|                               |      |     |     |

Date started 5-11-00 Completed 5-15-00

### (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 \_\_\_\_\_

### (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 \_\_\_\_\_

Signed Shed Date 5-29-00