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STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT.
SALEM, OREGONWELL I.D. # L 47607
START CARD # 133532(1) LAND OWNER
Name Phillip J. Fide
Address PO Box 395
City CHRISTMAS VALLEY State OR 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 920 ft.
Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
8.34"	0	219	Cement	219	119	4.0 sack	
8.34"	219	770		0	50		
8.34"	770	920					

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☐ OtherBackfill placed from 119 ft. to 30 ft. Material Ben tel
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Drive Shoe used ☐ Inside ☐ Outside ☐ None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

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

Yield gal/min	Drawdown	Drill stem at	Time
2500		920	1 hr

 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 26 N or S Range 16 E or W. WM.
Section 34 1/4 NE 1/4
Tax Lot 7900 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) oil pit north 3 mile from left right long road(10) STATIC WATER LEVEL:
23.8 ft. below land surface. Date 4-30-01
Artesian pressure _____ lb. per square inch Date _____(11) WATER BEARING ZONES:
Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
140	140.2	100	15'
280	285	600	

(12) WELL LOG:
Ground Elevation _____ WATER RESOURCES DEPT.
SALEM, OREGON

Material	From	To	SWL
TOP SOIL	0	3	
Shale Brown	3	6	
Brown Clay	6	10	
Gravel Clay	10	45	
Brown Clay	45	125	
Gray clay stone	125	220	
Brown Clay stone	220	284	
Gray Ball with Runicarb	284	283	23.8
Gravel Clay	283	285	11
Lake Rock Black WB	285	770	11
Gray Basalt	770	780	11
Red Cider WB	780	800	11
Gray Basalt	800	810	
Red Lake Rock WB	810	845	
Gray Basalt	845	910	
Red Cider	910	920	

Date started 4-18-01 Completed 4-30-01(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 Th... WWC Number 16521 Date 5-12-01