

STATE OF OREGON
WATER SUPPLY WELL REPORT

WELL I.D. # L 57913
START CARD # 162626

Instructions for completing this report are on the last page of this form. LAKE 51576

(1) LAND OWNER: Name Low Elder Well Number _____
Address 29306 Albert Road
City Laneview State OR Zip 97630

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

HOLE SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
8"	370	409				

How was seal placed: Method A B C D E
 Other _____
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: <u>None</u>							
Liner:							

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

(7) PERFORATIONS/SCREENS:

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield 950 gal/min Drawdown _____ Drill stem at _____ Time 1hr

Temperature of water _____ Depth At _____ ft. by _____
Was a water analysis done? Yes No 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 Lane Latitude _____ Longitude _____
Township 36 N or S Range 21 E or W. WM.
Section 5 SW 1/4 NE 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 29306 Albert Road
Laneview OR 97630

(10) STATIC WATER LEVEL: _____ ft. below land surface. Date 7-12-04
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
<u>NO</u>	<u>Water</u>	<u>HIT</u>	

(12) WELL LOG: Ground Elevation _____

Material	From	To	SWL
<u>Brown Sand</u>	<u>370</u>	<u>409</u>	

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OCT 01 2004
WATER RESOURCES DEPT
SALEM, OREGON

Date started 7-12-04 Completed 7-20-04

(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 1654
Signed [Signature] Date 8-24-04

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