

LAKE 51753

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

WELL I.D. # L 68375START CARD # 175628

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

(1) LAND OWNER Ron La Franchi Well Number _____
Name Ron La Franchi
Address 580 N Central
City COQUILLE State OR Zip 97423

(2) TYPE OF WORK ☒ New Well
☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Other _____

(4) PROPOSED USE
☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☒ No
Depth of Completed Well 960 ft.
Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds	
24"	0	80	Cement	0	80	5425	
11.75"	80	960					

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Grout Pump
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Casing	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
18"	1	80	375		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 ☐ Bailor ☒ Air ☐ Flowing Artesian
Yield gal/min 50 Drawdown _____ Drill stem at _____ Time 1 hour

Temperature of water _____ 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 (legal description)

County LAKE
Tax Lot 3000 Lot _____
Township 26 N or S Range 15 E or W WM
Section 24 NW 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL
35 ft. below land surface. Date 4-17-06

_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
120	690	20 GPM	37'
910	960	50 GPM	35'

(12) WELL LOG

Ground Elevation _____

Material	From	To	SWL
Sandy Soil Lt Br clay	0	30	
Clay Green	30	90	
Lava Rock Black	90	120	
Sand Black coarse	120	160	
Clay Dark Brown	160	230	
Clay Lt Brown	230	690	
Gravel + hard soil	690	910	
Green clay: white Amalg	910	960	

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APR 19 2006

WATER RESOURCES DEPT
SALEM, OREGON

Date Started _____

Completed _____

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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 _____ Date 4-17-06Signed [Signature]

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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 _____ Date _____

Signed _____

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ORIGINAL - WATER RESOURCES DEPARTMENT

FIRST COPY - CONSTRUCTOR

SECOND COPY - CUSTOMER

06/16/2004

WATER RESOURCES DEPT
SALEM, OREGON

Amended 6-25-12
Ron La Franchi

[Signature], 6-25-12

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

LAKE 51753
LAKE 51753

DRAFT

WELL I.D. # L 88375

START CARD # 175628

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

(1) LAND OWNER Name Ron La Franchi Well Number _____
Address 580 N Central
City COQUILLE State OR Zip 97423

(2) TYPE OF WORK ☒ New Well
☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Other

(4) PROPOSED USE
☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☒ No
Depth of Completed Well 960 ft.
Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
24"	0	80	Cement	0	80	545
11 3/4"						

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Grout Pump

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER
Casing: Diameter 18 From +1 To 80 Gauge _____ Steel ☒ Plastic ☐ Welded ☐ Threaded ☐
Liner: _____

Drive Shoe used ☐ Inside ☐ Outside ☐ None
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 Artesian

Yield gal/min	Drawdown	Drill stem at	Time

Temperature of water _____ Depth Artesian Flow Found _____
Was a water analysis done? ☐ Yes By whom _____
Did any strata contain water not suitable for intended use? ☐ Yes ☐ No little
☐ Salty ☐ Muddy ☐ Odor ☐ Color ☐ Other _____
Depth of strata: _____

(9) LOCATION OF WELL (legal description)

County Lake
Tax Lot 3000 Lot _____
Township 26 N or S Range 15 E or W WM
Section 24 NW 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL

35 ft. below land surface. Date _____
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

From	To	Estimated Flow Rate	SWL
120	690		
910	960		

(12) WELL LOG

Material	From	To	SWL
Sandy Soil Lt Br clay	0	30	
Clay Green	30	90	
Lava Rock Black	90	120	
Sand Black coarse	120	160	
Clay Dark Brown	160	230	
Clay Lt Brown	230	690	
Gravel hard grey	690	910	
Green clay: water percolate	910	960	

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WATER RESOURCES DEPT
SALEM, OREGON

Date Started 3-26-07 Completed 4-17-06

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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 _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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 _____ Date _____

Signed _____

LAKE 51753

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 88375

START CARD # 175628

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Name Ron La Franch Well Number _____
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 City COQUILLE State OR Zip 97423

(2) TYPE OF WORK

☒ New Well
☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion

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☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
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(5) BORE HOLE CONSTRUCTION

Special Construction: ☐ Yes ☒ No
 Depth of Completed Well 960 ft.
 Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE

Diameter	From	To	Material	From	To	Sacks or Pounds
24"	0	80	Cement	0	80	545

SEAL

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Grout Pump

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: 18"	+1	80		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used ☐ Inside ☐ Outside ☐ None

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 Artesian

Yield gal/min	Drawdown	Drill stem at	Time

Temperature of water _____ Depth Artesian Flow Found _____

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Depth of strata: _____

(9) LOCATION OF WELL (legal description)

County Lake
 Tax Lot 3000 Lot _____
 Township 26 N or S Range 15 E or W WM
 Section 24 NW 1/4

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 Long _____ " or _____ (degrees or decimal)

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Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
120	690		
910	960		

(12) WELL LOG

Material	From	To	SWL
Sandy Soil Lt Br clay	0	30	
Clay Green	30	90	
Lava Rock Black	90	120	
Sand Black coarse	120	160	
Clay Dark Brown	160	230	
Clay Lt Brown	230	690	
Gravel Hard Grey	690	910	
Green clay: water pence	910	960	

RECEIVED

APR 19 2006

WATER RESOURCES DEPT
SALEM, OREGON

Date Started _____

Completed _____

(unbonded) Water Well Constructor Certification

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WWC Number _____ Date _____

Signed _____

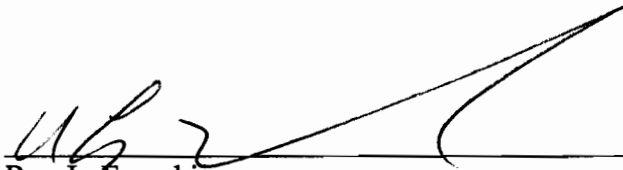
LAKE 51753

RON'S OIL COMPANY

580 North Central Coquille, Oregon 97423 (541) 396-5571

Pivot # P-11
Start Card # 175628

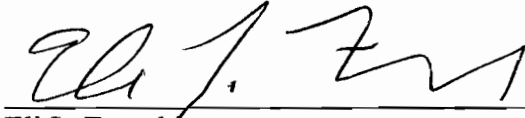
The following people were drilling machine operators during the construction of this well.



Ron LaFranchi Date APR 17 2006



Al Ashby Date APR 17 2006



Eli LaFranchi Date APR 17 2006



Dwayne Hand Date APR 17 2006

