

LAKE 51756

LAKE 51756

Amended
P-11STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

WELL I.D. # L

START CARD # 175627

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

(1) LANDOWNER Well Number
Name Bon 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 1240 ft.
Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
26"	+	40	Bentonite	0	40	225 Sacks
15"	48	680				
12"	680	1240				

How was seal placed; Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other GravityBackfill placed from _____ ft. to _____ ft. Material _____
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

☐ 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 ☐ Bailor ☒ Air ☐ Flowing ArtesianYield gal/min 50 Drawdown _____ Drill stem at 1235 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☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

(9) LOCATION OF WELL (legal description)

County Lake
Tax Lot 3101 Lot _____
Township 26 N or S Range 15 E or W WM
Section 24 SW 1/4Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)Street Address of Well (or nearest address) 80686 Connelly Lane
Silver Lake OR 97735

(10) STATIC WATER LEVEL

21 ft. below land surface. Date 3-20-06

_____ ft. below land surface. Date _____

Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found 75

From	To	Estimated Flow Rate	SWL
240	680	20	23
880	1240	50	21

(12) WELL LOG

Ground Elevation _____

Material	From	To	SWL
Sandy Soil LT BR clay	0	20	
Clay LT BR	20	60	
Lava Rock Black	60	240	
Clay Dark BR	240	480	
Clay Lava Rock	480	680	
Lava Rock Black	680	880	
Lava Rock Red: Blk	880	1100	
Lava Rock Black	1100	1240	

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APR 18 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 Landowner Date 3-21-06

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 _____

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JUN 2 2012 ORIGINAL - WATER RESOURCES DEPARTMENT

FIRST COPY - CONSTRUCTOR

SECOND COPY - CUSTOMER

06/16/2004

WATER RESOURCES DEPT
SALEM, OREGON

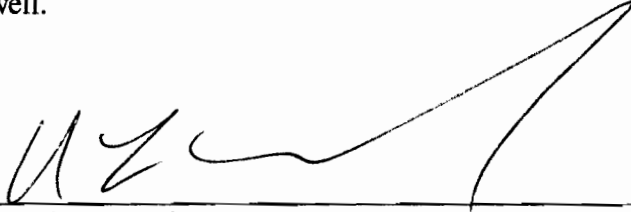
LAKE 51756

RON'S OIL COMPANY


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

Pivot # P-12
Start Card # 175627


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



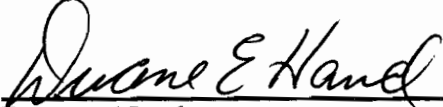
Ron LaFranchi Date MAR 21 2006



Al Ashby Date MAR 21 2006



Eli LaFranchi Date MAR 21 2006



Dwayne Hand Date MAR 21 2006

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APR 19 2006

**WATER RESOURCES DEPT
SALEM, OREGON**

amended
LAKE 51756
10-3

LAKE 517520 p-11

START CARD # 175621

(1) **LAND OWNER** Well Number _____
 Name Ron LaFrance
 Address 580 N Central
 City Agua Fria State CO Zip 81052

Signed _____

DEC 19 2007

LAKE 51756

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L

START CARD # 175627

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

(1) LANDOWNER Well Number
Name Ron LaFranchi
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 1240 ft.
Explosives used: ☐ Yes ☒ No Type Amount

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
26"	0	48	Bentonite	0	48	225 sacks
15"	60	680				
12"	680	1240				

How was seal placed; Method ☐ A ☐ B ☐ C ☐ D ☐ E

☒ Other Gravity

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 48 1.375 ☒ ☐ ☒ ☐
Liner: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

Drive Shoe used ☐ Inside ☐ Outside ☐ None

Final location of shoe(s)

(7) PERFORATIONS/SCREENS
☐ Perforations Method
☐ Screens Type Material

N/A

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

N/A

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? ☐ Too little
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other
Depth of strata:

(9) LOCATION OF WELL (legal description)

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Tax Lot 3101 Lot
Township 26 N or S Range 15 E or W WM
Section 24 SW 1/4

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

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240	680		
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(12) WELL LOG

Ground Elevation

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Date Started Completed

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WWC Number Landowner Date 3-21-06

Signed UAB 2

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WWC Number Date

Signed