

LAKE 52012

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

P-13

DRAFT

WELL I.D. # 95247
START CARD # 193752

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

(1) LAND OWNER La Franchette Well Number _____
Name Red
Address 580 n Central
City Logville State GA Zip 97423

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

(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 _____ ft.
Explosives used: ☐ Yes ☐ No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds

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				Steel	Plastic	Welded	Threaded
	Diameter	From	To	Gauge			
Casing:					<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"/>

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"/>
						<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 _____ Flow _____ Erosion _____
 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 2800 Lot _____
Township 26 N or S Range 15 E or W WM 0
Section 21 1/4 1/4

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

Street Address of Well (or nearest address) 80486 Cannkey
line Silver lake, CA 97755

(10) **STATIC WATER LEVEL**
 _____ ft. below land surface. Date _____
 _____ 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

(12) WELL LOG		Ground Elevation	
Material	From	To	SWL
340 ft to 200 ft			
WASH CRUSH			
3/4 ROCK			
200 ft - 351	SACKS		
OF	hole plug		
	Bennite		

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 12 Date 1/11/2011

Signed [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 _____

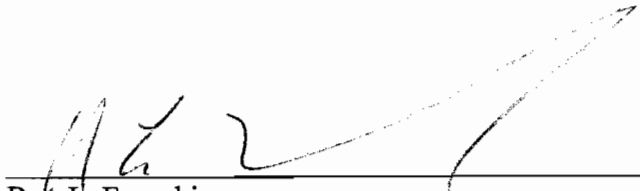
~~WATER RESOURCES DEPT~~

LAKE 52012
RON'S OIL COMPANY

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

Pivot # P-13
Start Card # 193752

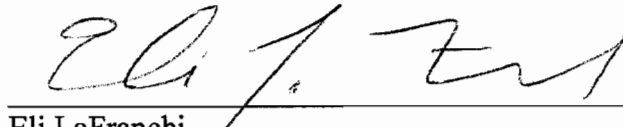
The following people were drilling machine operators during the construction of this well.



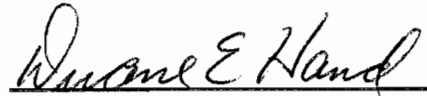
Ron LaFranchi Date **JUL 18 2007**



Al Ashby Date **JUL 18 2007**



Eli LaFranchi Date **JUL 18 2007**



Dwayne Hand Date **JUL 18 2007**

RECEIVED
DEC 19 2007
WATER RESOURCES DEPT
SALEM, OREGON