

The original and first copy of this report are to be filed with the

RECEIVED WATER WELL REPORT LANE 19846 STATE OF OREGON LANE AUG 30 1971

State Well No. 19/1W-29

STATE ENGINEER, SALEM, OREGON 97310

(Please type or print)

State Permit No.

within 30 days from the date of well completion

(Do not write above this line)

019846

(1) OWNER:

Name SHILOH-OREGON YOUTH REVIVAL CENTER Address STAR ROUTE #1 DEXTER

(2) TYPE OF WORK (check):

New Well [X] Deepening [] Reconditioning [] Abandon [] If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary [X] Cable [] Dug [] Driven [] Jetted [] Bored []

(4) PROPOSED USE (check):

Domestic [X] Industrial [] Municipal [] Irrigation [] Test Well [] Other []

CASING INSTALLED:

6" Diam. from 1 ft. to 19 ft. Gage 14"

PERFORATIONS:

Type of perforator used Size of perforations in. by in. perforations from ft. to ft.

(7) SCREENS:

Well screen installed? [] Yes [X] No Manufacturer's Name Type Model No. Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level Was a pump test made? [] Yes [X] No Yield: gal./min. with ft. drawdown after hrs. ART LIFT 15 gal./min. with MAX ft. drawdown after 17 hrs. Artesian flow 5 g.p.m. Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal-Material used CEMENT GROUT Well sealed from land surface to 19 ft. Diameter of well bore to bottom of seal 10 in. Diameter of well bore below seal 6 in. Number of sacks of cement used in well seal 5 sacks Number of sacks of bentonite used in well seal Brand name of bentonite Number of pounds of bentonite per 100 gallons of water Was a drive shoe used? [] Yes [X] No Plugs Size: location ft. Did any strata contain unusable water? [] Yes [] No Type of water? depth of strata Method of sealing strata off Was well gravel packed? [] Yes [X] No Size of gravel: Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County LANE Driller's well number 1/4 Section 29 T. 19 S. R. 1 W. W.M. Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 6 ft. Static level ft. below land surface. Date Artesian pressure 2 lbs. per square inch. Date 7-30-71

(12) WELL LOG:

Diameter of well below casing 6" Depth drilled 220 ft. Depth of completed well 220 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

Table with columns: MATERIAL, From, To, SWL. Rows: CLAY w/ GRAVEL (0-3), CLAY (3-5), BLUE SS (5-220+4')

CASINO PRESSURE CROUTED INTO BEDROCK 14'

NO WATER BEARING STRATA ENCOUNTERED UNTIL WATER STRATA WITH ARTESIAN PRESSURE AT 220'

Work started 7-27 1971 Completed 7-30 1971 Date well drilling machine moved off of well 7-30 1971

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief. [Signed] Mark Christensen Date 7-30, 1971 (Drilling Machine Operator) Drilling Machine Operator's License No. 9

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Name MARK CHRISTENSEN (Person, firm or corporation) (Type or print) Address 3550 W 18th Eugene [Signed] Mark Christensen (Water Well Contractor) Contractor's License No. 77 Date 7-30, 1971



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301-1266
(503) 986-0900
www.wrd.state.or.us

Application for
Well ID Number

L32127

Do not complete if the well already has a Well I.D Number.

I. OWNER INFORMATION

Current Owner Name (please print): Lost Valley Center, Inc.
Mailing Address: 81868 Lost Valley Ln.
City, State, Zip: Dexter OR 97431
Mailing Address (to send Well I.D.): Same
City, State, Zip: Same

II. WELL INFORMATION (Do not complete this section if the well report is attached.)

Lane 019846

Township: _____ (North/South) Range: _____ (East/West) Section: _____
Tax Lot: _____ County _____ 1/4 _____ 1/4
Street Address of Well, City: _____
Owner at time the well was constructed, (if known): _____
If the property had a different street address in the past: 43.89148 122.83096

III. GENERAL WELL INFORMATION (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): _____
Date Well Constructed: _____ Total Well Depth: _____ Casing Diameter: _____
Other Information: _____

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SUBMITTED BY (please print): Michael Mattick, Watermaster AUG 21 2013
PHONE: _____ FAX: Dist 2

SALEM, OR

Send application to Oregon Water Resources Department; 725 Summer Street NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Tuesday.

For Official Use Only by the Oregon Water Resources Department		
Received Date:	Well Log Number:	Well Identification #:
REC'VD 8-21-13	Log LANE 19846	ID# L-32127