

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

LANE 2164
 LANE 2164

19S/12W/3 dd
 (START CARD) # 32983

(1) OWNER: Well Number: 658
 Name Morgans
 Address 85080 Hwy 101 So.
 City Florence State OR Zip 97439

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 110 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks	or pounds
10"	0' 19'	Cement	0' 18'	4	Sacks
6"	19' 110'				

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: 6"	+1'	88'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	+1'	100'	.160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) None

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type WRAP RIB Material PVC

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
100'	110'	.008		4"		<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 15 GPM Drawdown 34' Drill stem at _____ Time 1 hr.
 Temperature of water 53° 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 by legal description:
 County Lane Latitude _____ Longitude _____
 Township 19S N or S, Range 12W E or W, WM. _____
 Section 03 SE 1/4 SE 1/4
 Tax Lot 5400 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:
60' ft. below land surface. Date 7/13/91
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 100'

From	To	Estimated Flow Rate	SWL
100'	110'	15 GPM	60'

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Topsoil	0	2	0
Brown Clay & Sand	2	16	0
Brown Sand & Clay	16	43	0
Grey Sand	43	82	0
Brown Sand	82	104	0
White Sand	104	109	60
Grey Clay	109	110	60

Date started 7/9/91 Completed 7/13/91

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed _____ WWC Number _____
 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed Donald J. Jovine WWC Number 751
 Date 7/15/91



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301
 (503) 986-0900
 www.oregon.gov/owrd

Application for Well ID Number

RECEIVED

AUG 1 2023

OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): Thomas Morley

Mailing Address: 85020 HWY 101 UNIT 1

City, State, Zip: Florence, Oregon 97439

Mail Well ID to: SAME AS ABOVE In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 19 S (North / South) Range: 12 W (East / West) Section: 3 SE 1/4 of the SE 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 5400 County Lane

GPS Coordinates: 43.943517 -124.104349

Street Address of Well, City: 85020 HWY 101, Florence, Oregon 97439

If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): domestic

Date Well Constructed (or property built): 7-13-1991 Total Well Depth: 110' Casing Diameter: 6"

Owner at time the well was constructed (if known): Morgan's Country Kitchen Well Report # (if known): LANE 2164

Other Information: _____

SUBMITTED BY (please print): Thomas Morley

PHONE: 541 999 8914 EMAIL &/or FAX: 2016tomm@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
 Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

8-1-2023

Well Report Number:

LANE 2164

Well Identification #:

L-151844