## STATE OF OREGON

WATER WELL REPORT WATER RESOURCES DEPT (START CARD) # (as required by ORS 537.765) (9) LOCATION OF WELL by legal description: (1) OWNER: \_\_\_\_\_ Longitude County 1026 Latitude Nor S. Range 12W SE 1/2 New 1/4 (2) TYPE OF WORK: Tax Lot 4700 Lot \_\_\_ \_\_\_\_\_ Block \_\_\_ Street Address of Well (or nearest address) ☐ Deepen ☐ Recondition Abandon. (3) DRILL METHOD (10) STATIC WATER LEVEL: Rotary Air Rotary Mud Cable ft. below land surface. (4) PROPOSED USE: Domestic ☐ Community ☐ Industrial ☐ Irrigation (11) WATER BEARING ZONES: ☐ Injection Other ☐ Thermal Depth at which water was first found (5) BORE HOLE CONSTRUCTION: Estimated Flow Rate SWL From Depth of Completed Well 53 Special Construction approval Yes 43 15 GPM 10 Explosives used  $\square$  Type HOLE To, Material From To Diameter From sacks or pounds Sacks ement (12) WELL LOG: Ground elevation SWL Material To 0 Ja.m 27 27 40 0 Other \_ 43 10 Backfill placed from \_ .ft. to \_ Material 53 ft. to \_\_\_ Gravel placed from \_ \_\_\_ ft. Size of gravel (6) CASING/LINER: Gauge Steel Plastic Welded  $\Box$ Final location of shoe(s) (7) PERFORATIONS/SCREENS: ☐ Perforations Type Weap Pib Material \_ Screens Slot Tele/pipe Number Diameter Liner size Casing 800. --Date started. Completed (unbonded) Water Well Constructor Certification: (8) WELL TESTS: Minimum testing time is 1 hour I certify that the work I performed on the construction, alteration, or

Pump	☐ Bailer	☐ Air	Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
15 6PM	23		1 hr.
emperature of wate	er _\$2°	Depth Artesian F	low Found
-	done?		
	in water not suitable	_	Too little

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 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

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other -

Depth of strata:

## **LANE 2349**

## For Official Use Only:

Received Date:

County Well Log ID #

Well Identification Tag #

"Lave 2349"

36676

## WELL IDENTIFICATION APPLICATION FORMECEIVED

BUYER/CURRENT WELL OWNER:	NOV 1 9 1999
Name: FRED HILDEN	WATER RESOURCES DEPT.
Mailing Address: 4776 LAUREL AVE WE	SALEM, OREGON
City WKIT LANK State: OR Zip: 97 493 Phor	,
	ie: (30) 11 / 6036
WELL LOCATION: (LANE 2349")	
County: LANE Owner's Well Number	2349
Township: 19 N or S, Range: 12 E or W, Section: 3 4	• •
Tax Lot Number: 4500 Type of Well: water supply X	monitoring
Street Address of Well (if different from above):	
WELL INFORMATION: (do not complete remainder of application if	well log is available)
Start Card Number: Approx. Construction Date:	
Well Constructor:	·
Name of Owner at Time of Construction:	
Well Depth (in feet): Static Water Level (in feet):	
Diameter of Exposed Well Casing (in inches):	
Does this well have a formal water right associated with it? Yes:	No:
If Yes: Application #: Permit #: Certi	ficate #:
Please Return Completed Form to:  Lisa Juul  Well Identification Program	
Oregon Water Resources De 158 12th Street NE	partment
Salam OP 07310	
Hease Send to: Audential Pa PO Box 276 Florence, Orea	acific Hoperties
Florence, Orea	10n 97454