

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

**LANE**  
**3187**

SEP - 8 1992

1605/2W/25ca  
 42956

WATER RESOURCES DEPT. (START CARD) #

**(1) OWNER:**

Well Number: \_\_\_\_\_  
 Name JASPER Mtn. CHILDRENS HOME  
 Address 37875 JASPER LOWELL RD.  
 City JASPER State OR Zip 97438

**(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 260 ft.  
 Yes No    
 Explosives used   Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10	0	39	CEMENT	0	39	12
6	39	260				

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	39	252	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4 1/2	3	260	50226	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoets) \_\_\_\_\_

**(7) PERFORATIONS/SCREENS:**

Perforations Method SAW  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
220	260	1/8	160		4 1/2	<input type="checkbox"/>	<input checked="" type="checkbox"/>

**(8) WELL TESTS: Minimum testing time is 1 hour**

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
30		260	1 hr.

Temperature of water 56° 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 16S N or S. Range 2W E or W. WM.  
 Section 25 NE 1/4 3W 1/4  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 37875 JASPER LOWELL RD.

**(10) STATIC WATER LEVEL:**

54 ft. below land surface. Date 8/28/92  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**

Depth at which water was first found 248

From	To	Estimated Flow Rate	SWL
247	248	30	54

**(12) WELL LOG:**

Ground elevation \_\_\_\_\_

Material	From	To	SWL
GRAVEL FILL	0	2	
YELLOW CLAY	2	16	
YELLOW SHALE	16	22	
BLUE CLAYSTONE	22	26	
YELLOW SHALE	26	29	
LAYERED BLUE TUFF	29	195	
GRAY ROCK	195	205	
LAYERED BLUE TUFF	205	260	54

Date started 8/26/92 Completed 8/28/92

**(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.

WWC Number \_\_\_\_\_  
 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 belief.

WWC Number 562  
 Signed Frank Wilson Date 8/31/92