

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

4428  
 LANE 4428  
 Lane  
 PAGE 1 OF 2

**RECEIVED**  
 JAN - 5 1994

1608/4W/326  
 (START CARD) # 49419

(1) OWNER: Well Number \_\_\_\_\_  
 Name JUNCTION CITY  
 Address CITY HALL 7TH & GREENWOOD ST  
 City JUNCTION CITY State OR Zip 97448

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

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Other  
 MAR 31 1994

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

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval  Yes  No Depth of Completed Well 262 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

| Diameter | HOLE |      | Material | SEAL |      | Amount<br>sacks or pounds |
|----------|------|------|----------|------|------|---------------------------|
|          | From | To   |          | From | To   |                           |
| 20"      | 0    | 18.5 | CEMENT   | 0    | 18.5 | 58                        |
| 16"      | 18.5 | 70   | CEMENT   | 18.5 | 70   |                           |
| 12"      | 70   | 262  |          |      |      |                           |

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: 12    | +2    | 108   | .375  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner: 10" ID | 256.5 | 262   | .280  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
|               | 1/2   | PLATE |       | <input type="checkbox"/>            | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |

Final location of shoe(s) NBARS

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_  
 Screens Type JANSON V WIRE Material STAINLESS

| From  | To    | Slot size | Number | Diameter | Tele pipe size | Casing                   | Liner                    |
|-------|-------|-----------|--------|----------|----------------|--------------------------|--------------------------|
| 105.5 | 256.5 | 12        |        |          | 12             | <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   |
|---------------|------------|---------------|--------|
| 900           | 20.5       |               | 1 hr.  |
|               | 70         |               |        |
|               | 72' = 51.5 |               | 41 HRS |

Temperature of Water 52°F 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 4W E or W. WM. \_\_\_\_\_  
 Section 32 SE 1/4 NW 1/4 \_\_\_\_\_  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 13th & Elm  
JUNCTION CITY

(10) STATIC WATER LEVEL:  
17.9 ft. below land surface. Date 12-30-93  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 21

| From | To   | Estimated Flow Rate | SWL |
|------|------|---------------------|-----|
| 10.5 | 25.6 | 1000 GPM            | 20  |
|      |      |                     |     |
|      |      |                     |     |

(12) WELL LOG:  
 Ground elevation \_\_\_\_\_

| Material                           | From | To  | SWL |
|------------------------------------|------|-----|-----|
| FILL                               | 0    | 2   |     |
| SANDY LOAM                         | 2    | 10  |     |
| GRAVEL CEMENTED                    | 10   | 21  |     |
| LARGE OPEN GRAVEL                  | 21   | 37  |     |
| BLUE & BROWN CLAY TRACES OF GRAVEL | 37   | 61  |     |
| PLASTIC BLUE CLAY HIGH SUGAR       | 61   | 95  |     |
| WOOD WITH CLAY                     | 95   | 96  |     |
| CLAY SOME WOOD                     | 96   | 101 |     |
| CLAY                               | 101  | 103 |     |
| CLAY WITH THIN SAND BEDS           | 103  | 109 | ↑   |
| CLAY WITH THICKER SAND BEDS        | 109  | 120 |     |
| COURSE SAND WITH CLAY BEDS         | 120  | 126 |     |
| COURSE SAND                        | 126  | 129 |     |
| COURSE SAND WITH CLAY BEDS         | 129  | 134 |     |
| FINE SAND WITH CLAY BEDS           | 134  | 147 | 20' |
| SAND WITH CLAY                     | 147  | 158 |     |
| COURSE SAND, CLAY BED WOOD         | 158  | 176 |     |
| SAND WITH CLAY BEDS                | 176  | 198 |     |
| CLAY BROWN                         | 198  | 201 |     |
| CONTINUED                          |      |     |     |

Date started 3-11-93 Completed 12-30-93

(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 97  
 Signed \_\_\_\_\_ Date 12-30-93





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

SEP 25 2019

OWRD

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

**I. OWNER INFORMATION**

Current Owner Name (please print): City of Junction City  
 Mailing Address: P.O. Box 250  
 City, State, Zip: Junction City Or 97448  
 Mail Well ID to:  SAME AS ABOVE  In Care Of (C/O)  
 Name & Address: Gary Kaping 1171 Elm St (Jet city Public Works)  
 City, State, Zip: Junction City or 97448

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

Township: 16S (North / South) Range: 4W (East / West) Section: 32 SE 1/4 of the NW 1/4  
 Tax Lot (usually last 3-5 numbers of Tax Map #): 3400 County Lane  
 GPS Coordinates: \_\_\_\_\_  
 Street Address of Well, City: 13th and Elm  
 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): 12/30/93 Total Well Depth: 256' Casing Diameter: 12"  
 Owner at time the well was constructed (if known): City of Junction City Well Report # (if known): Lane 4428  
 Other Information: Replacement tag for L-30706 \*

SUBMITTED BY (please print): Gary L. Kaping  
 PHONE: 541-228-0277 EMAIL &/or FAX: gkaping@ci.junction-city.or.us

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.  
 Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

\* Replacement tag!

For Official Use Only by the Oregon Water Resources Department:

|                                  |   |   |
|----------------------------------|---|---|
| Received Date:<br><u>9-25-19</u> | Well Report Number:<br><u>LANE 4428</u> | Well Identification #:<br><u>L-135909</u> |
|----------------------------------|---|---|

**OREGON HEALTH DIVISION ONLY:**  
**RECEIVED**

Received Date: \_\_\_\_\_

JUL 20 1999

WATER RESOURCES DEPT.  
SALEM, OREGON

County Well Log ID #  
LANE 4428

**WELL IDENTIFICATION LABEL ATTACHMENT FORM**  
**(OREGON HEALTH DIVISION)**

**COMPANY /CURRENT WELL OWNER:**

OWNER (S) WELL NO: 13<sup>th</sup> + ELM

Name: Junction City Water Utilities

Mailing Address: P.O. Box 250

City: Junction City State: OR Zip: 97448 Phone: (541) 998-3125

**CONTACT PERSON:**

NAME: David Renshaw PHONE # 541-998-3125

**THIS FORM IS ONLY TO BE USED FOR WELLS WITH  
POSITIVELY IDENTIFIED  
WATER SUPPLY WELL REPORTS.**

**O.H.D. OFFICIAL USE ONLY**

TOWNSHIP: 15 N (S) RANGE: 4 E (W) SECTION: 32 TAX-LOT: \_\_\_\_\_

Well Identification Label : L-30706

LABEL ATTACHED BY: Dennis Nelson DATE: 7/19/99  
(O.H.D. OFFICIAL)

**(WATER SUPPLY WELL REPORT MUST BE ATTACHED!)**

Please Return Completed Form to:

Larry D. McQueen  
Well Identification Program  
Oregon Water Resources Department  
158 12th Street NE  
Salem, OR 97310

L-30706  
lost!  
Repl: L-135909