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

WATER RESOURCES DEPT.

(START CARD) # 72119

Instructions for completing this report are on the last page of this form.

SALEM, OREGON

(1) OWNER: Well Number _____
Name Larry A. Dilbeck
Address 1130 South 42nd St.
City Springfield State Or. Zip 97478

(2) TYPE OF WORK
☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:
☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger
☐ Other _____

(4) PROPOSED USE:
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☐ No Depth of Completed Well 175 ft.
Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE			SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds	
10"	0'	18'	Bentonite	0'	22'	20 sacks	
8"	18'	100'					
6"	100'	175'					

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"	+18"	100'	250	☒	☐	☒	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
Liner: 5"	90'	175'	160	☐	☒	☐	☐
				☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☒ Perforations Method Torch & Saw
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
93'	98'	1/2 x 6	35	6"		☒	☐
93'	98'	1/4 x 6	40	5"		☐	☒
						☐	☐
						☐	☐

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

☐ Pump ☒ Bailor ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
3-G.P.M.	10'		1 hr.

Temperature of water 51 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 17-S N or S Range 2-W E or W. WM.
Section 36 N.W. 1/4 S.W 1/4
Tax Lot 1300 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 77th and So. A

(10) STATIC WATER LEVEL:
73 ft. below land surface. Date 12-20-95
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 97'

From	To	Estimated Flow Rate	SWL
97'	97.6'	3-G.P.M.	73'

(12) WELL LOG:
Ground Elevation 600'

Material	From	To	SWL
Red Clay and Boulder's	0'	80'	
Cemented sand & Gravel	80'	97'	
Sand & Gravel	97'	97.6'	73'
Water bearing			
Blue Schale & Blue Clay	98'	175'	

Date started 11-29-95 Completed 2-4-96

(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 water supply well construction standards. Materials used and information reported above are true to the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
Signed Anthony R. George WWC Number 1626 Date 1-4-96