WATER WELL REPORT (as required by ORS 537.765)

(START CARD) # 4 1066

County Latitude Longitude Township R S N or S Range 2 L) E or W. WM Street State OR Zip 97479 State OR Zip 97479 State OR Zip 97479 State OR Zip 97479 OR Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S N or S Range D L E or W. WM Section Longitude Township R S Subdivision Township R S Township Townsh	Instructions for completing this report are on the last page of this form.		
County Language	(1) OWNER: Well Number 4	(9) LOCATION OF WELL by legal description:	
theres D5O 3.5			
State Stat	Address 1050 35% St.		v. wm.
NYED OF WORK New Well December Alteration (repair/recondition) Abandonment		Section 1.5 5/W 1/4 5E 1/4	
New Well Deepening Alteration (repair/recondition) Abandoment			
DRILL METHOD: Rectary Air Recary Mad Cable Auger Other Oth			
Rotary Arr Rotary Mod Cable Auger			
PROPOSED USE:	` '	(10) STATIC WATER LEVEL:	,
PROPOSED USE: Cummunity Industrial Irrigation Chromatic Injection Livestock Other	-	1	2.3
Community Industrial Irrigation Investor Other	(4) PROPOSED USE:	1 •	
Deepth at which water was first found Deepth at which water was first found	M Domestic ☐ Community ☐ Industrial ☐ Irrigation		
Spot HOLE CONSTRUCTION: period Completed Well 100 ft ft ft ft ft ft ft			
Supposives used Yes No Type Amount Stantage Yes No Type HOLE Stantage From To Sucks or pounds No Type House Stantage Stant	(5) BORE HOLE CONSTRUCTION:	Depth at which water was first found	
Supposives used Yes No Type Amount Stantage Yes No Type HOLE Stantage From To Sucks or pounds No Type House Stantage Stant	Special Construction approval Yes No Depth of Completed Well bo f		
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12 9 15 15 15 15 15 15 15		6 98 380	6
12			
12	16' 0' 9' Bentonite 0' 9' 12 sacks		
Coverage			
Some particles Section			
Some particles Section		(12) WELL LOG:	
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Sand It blue w word for the construction alteration. or abundoment or fixed and belief. Sand It blue w word for the construction alteration. or abundoment of sa water analysis done? Yes By whom better of water Depth Artesian Flow Found water any sixed any strata contain water not suitable for intended use? Too little performed units well during the construction alteration. I accept responsibility for the construction, alteration. I accept responsibility for the constr			
Dameter From To Gauge Steel Plastic Welded Threaded Sand Th Dlue W Word Start Star			SWL
Diameter From To Gauge Steel Plastic Welded Threaded asing: 12" + 1 18 250	The second secon		6
Sasing: 2	(6) CASING/LINER:		6
Clay blue Sand 98 10 5 6			6
Clay blue Sand 98 05 6	Casing: 12 + 1 18 ,250	sand It blue in Sendy 84 98	6
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Perforations			
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Side Number Diameter Size Casing Liner Size Si			
Size Number Diameter Size Casing Liner	Slot Tale/nine		
Date started	From To size Number Diameter size Casing Line		
Construction Colored	25 42 1000 17 16K		
Construction Colored			
Construction Colored			
Construction Colored			
Construction Colored			1
Construction Colored	(2) WELL TESTS: Minimum testing time is 1 hours	Date storted 5/15/02 Completed 0/23/	92
Pump	well output may fly atmosfe		7_
Yield gal/min Drawdown Drill stem at Time 380 59	Flowing	, · · · · · · · · · · · · · · · · · · ·	ndon
Materials used and information reported above are true to the best of my knowledge and belief. WWC Number Signed Date		of this well is in compliance with Oregon water supply well construction sta	andards.
WWC Number Signed Date			owledge
Signed Date Signed Date	15 Fm.		
Conded Constructor Certification: Conded Construction Conded Const			
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 sandards. This report is true to the best of my knowledge and belief.			
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 suitable for intended use? Salty Muddy Odor Colored Other construction of this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction suitable for intended use? Too little performed on this well during the construction dates reported above. All work performed on this well during the construction dates reported above. All work performed on this well during the construction dates reported above. All work performed on this well during the construction dates reported above. All 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 studies.	• ———		ork
Salty Muddy Odor Colored Other construction studied is in compilance with Oregon water supply well construction studied. This report is true to the best of my knowledge and belief.	• • •	performed on this well during the construction dates reported above. All we	ork
lepth of strata:	•	construction standards. This report is true to the best of my knowledge and	helief
		Consultation structures. This report is true to the best of the knowledge and	7 /-
Signed them to the state of the	Lichni oi suata.	1 \T 1///V \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	la a li
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