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OCT. 22 1998

STATE OF OREGON
WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.
(as required by ORS 537.765) SALEM, OREGON
Instructions for completing this report are on the last page of this form.

WELL I.D. # L 24337
START CARD # 108012

(1) OWNER: Well Number _____
Name Fred Jack
Address 3071 Whitbeck Blvd
City Eugene State OR Zip 97405

(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 183 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	38	Bentonite	38	0	12 sacks
6"	38	183				

How was seal placed: Method A B C D E
 Other Poured DRY!
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"	0	38	29	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 6"				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) NA

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Artesian
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____
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 18 N or S Range 05 E or W WM
Section 19 SE 1/4 NE 1/4
Tax Lot 205 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 860.35 Territorial Rd Veneta, Ore 97487

(10) STATIC WATER LEVEL:
50 ft. below land surface. Date 9/19/98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 82'

From	To	Estimated Flow Rate	SWL
82'	85'	6 1/2 GPM	50
160'	163'	1 1/2 GPM	50

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	1	
Orangeish-Brown Clay	1	7	
Tan Clay	7	29	
Blue-Gray Sandstone	29	38	
Gray Claystone	38	43	
Blue-Gray Sandstone	43	183	50'

Date started 9/16/98 Completed 9/19/98

(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 Sean Oldham WWC Number 1562 Date 10/19/98