

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

LANE  
 56901

WELL I.D. # L 30017  
 START CARD # 118435

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

(1) OWNER: Well Number 1708  
 Name Bush's Fern View Farms  
 Address 90536 Territorial Rd  
 City Junction City State OR Zip 97448

(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 39 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL	
Diameter	From To	Material	From To Sacks or pounds
14"	0' 18'	Bentonite	0' 18' 11 Sacks
10"	18' 39'		

How was seal placed: Method  A  B  C  D  E  
 Other Placed @ 1 Sack pr 5 min rate.  
 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: 10"	1'	39'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: None				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 10" @ 39'

(7) PERFORATIONS/SCREENS:

Perforations Method Torch Cut  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
25'	38'	205	210			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailer  Air  Artesian

Yield gal/min	Drawdown	Drill stem at	Time
500+		39'	1 hr.

Temperature of water 55° 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 of S Range 04W E of W. WM. 0  
 Section 35 SE 1/4 NE 1/4  
 Tax Lot 00100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 30770 Luckyn Junction City, OR

(10) STATIC WATER LEVEL:  
10' ft. below land surface. Date 3-19-99  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 25'

From	To	Estimated Flow Rate	SWL
25'	39'	500+ GPM	10'

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

Material	From	To	SWL
Topsoil	0	2	
Brown Loam	2	18	
Blue Sand	18	22	
Sand & Gravel	22	35	10'
Cemented Gravel	35	37	
Sand & Gravel	37	39	

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APR 28 1999

WATER RESOURCES DEPT.  
 SALEM, OREGON

Date started 3-19-99 Completed 3-22-99  
 (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 KJD WWC Number 1411 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 Donald J. Fleming WWC Number 751 Date 3-29-99