

LANE
57312

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AUG 12 1999

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)
WATER RESOURCES DEPT.
SALEM, OREGON

WELL I.D. # L 34190
START CARD # 118477

Instructions for completing this report are on the back of this form.

(1) OWNER: Well Number 1750
Name Gary Keller
Address 94805 99w
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 32 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0'	30'	Bentonite	0'	30'	16 Sacks
6"	30'	30'				

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: 6"	1'	31'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: <u>None</u>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) None

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>None</u>							

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 25 Gpm Drawdown _____ Drill stem at _____ Time 1 hr.

Temperature of water 57° 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 15S N or (S) Range 04W E or (W) WM.
Section 30 SE 1/4 SE 1/4
Tax Lot 03901 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 94582
To S. Paul Ln Junction City OR

(10) STATIC WATER LEVEL:
6 ft. below land surface. Date 7-19-99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 30'

From	To	Estimated Flow Rate	SWL
30'	31'	25 GPM	6'

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	2	
Brown Clay	2	14	
Cemented Gravel	14	23	
Sand & Gravel	23	32	6'

Date started 7-16-99 Completed 7-19-99

(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 RT Dunt 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. Spring WWC Number 751 Date 7-25-99