REC LANE 59176

L09340

JAN 1 2 2001

WATER RESOURCES DEPT.
SALEM, OREGON

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

(START CARD) # 96778

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

(1) OWNER: Well Number #1
Name Springfield Utility Board
Address 202 S. 18th
City Springfield State OR Zip 97477

(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 test well

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☒ Yes ☐ No Depth of Completed Well 97 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
12"	0	20	bentonite	0	20	22
8"	20	56				
6"	56	97				

How was seal placed: Method ☐A ☐B ☐C ☐D ☐E
☒ Other as per OAR-690-210-340
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:	8"	+2.5'	58	.250	☒	☐	☒	☐
	6"	50	96	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:
☒ Perforations Method Star
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
26	49	1/4 x 1	378		pipe	☒	☐
60	77	1/4 x 1	218		pipe	☒	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
well output may fluctuate
☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
400	5	—	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 27 NW 1/4 SW 1/4
Tax Lot 400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1351 N. 66th Springfield, OR

(10) STATIC WATER LEVEL:
11.5 ft. below land surface. Date 2/18/97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 21

From	To	Estimated Flow Rate	SWL
21	37	340	
45	49	+ 150	11.5
69	74	+ 30	11.5

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	3	
Silt + sand	3	9	
Gravel cemented, sand	9	21	
Gravel, sand, med to fine	21	29	
Cobbles, gravel, sand	29	39	11.5
Gravel small, sand cemented	39	45	11.5
Gravel med, small sand	45	53	11.5
Boulders, large	53	58	11.5
Gravel, sand clay	58	74	11.5
Gravel, small, sand	74	92	11.5
Clay, gravel small, sand	92	97	11.5

Date started 1/20/97 Completed 2/18/97

(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.

WWC Number _____
Signed _____ 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.

WWC Number 636
Signed Paul Christensen V-Pres Date 3/17/97
Christensen Well Drilling Co.

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER