

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

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

WELL I.D. # L 53004
START CARD # 145112

(1) LAND OWNER Well Number 53004
Name ROBERT GREEN
Address 88925 SHENANDOAH
City SPRFLD State OR Zip 97478

(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 333 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	35	Cement	0	35	13 SKS
7.25"	35	39				
5.5"	39	333				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other TRIMMIE PIPE & M-8 PUMP

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	39	12.50	☒	☐	☒	☐
Liner: 4"	13'	333	160	☐	☒	☐	☐

Drive Shoe used ☒ Inside ☐ Outside ☐ None
Final location of shoe(s) 39' 5 1/2" I.D.

(7) PERFORATIONS/SCREENS:

☒ Perforations Method SKILSAW
☐ Screens Type SLOT Material PVC

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
115	331	6"	130	1/8"	4"	☐	☒

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing
☐ Artesian

Yield gal/min	Drawdown	Drill stem at	Time
11	—	331	1 hr.

Temperature of water 53 Depth Artesian Flow Found NO

Was a water analysis done? ☐ Yes By whom NO

Did any strata contain water not suitable for intended use? ☐ Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other NO

Depth of strata: NONE

(9) LOCATION OF WELL by legal description:

County LANE Latitude _____ Longitude _____
Township 17 N or S Range 01 E or W. WM. 01
Section 17 NW 1/4 NW 1/4
Tax Lot 1002 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 38704 Upper Camp Creek Road

(10) STATIC WATER LEVEL:

129' ft. below land surface. Date 10/08/01
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 315'

From	To	Estimated Flow Rate	SWL
315	327	11	129'

(12) WELL LOG:

Ground Elevation APPROX 550'

Material	From	To	SWL
TOPSOIL	0	2	
CLAY BROWN	2	30	
SANDSTONE GREY	30	315	
SANDSTONE CONGLOM.			
LITE/DARK FRACT.	315	327	129
SANDSTONE LT. GREY	327	333	

RECEIVED

OCT 17 2001

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 10/05/01 Completed 10/08/01

(unbonded) Water Well Constructor Certification:

I certify that the work 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 date 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 16953
Signed [Signature] Date 10/12/01