

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

(WELL I.D.)# L **58583**

(START CARD) # **149815**

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

(1) OWNER: Well Number **PW-02-02**  
 Name **Wildish Land Co.**  
 Address **PO Box 7428**  
 City **Eugene** State **OR** Zip **97401**

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other **Reverse Circ.**

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval  Yes  No Depth of Completed Well **425** ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
20"	0	100	Cement	0	100	118 sacks
16"	100	425				

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_  
 Backfill placed from **425** ft. to **427** ft. Material **Pea Gravel**  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 16"	+1	290	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 14"	280	295	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
14"	405	425	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Tele/pipe size	Casing	Liner
295	405	.090		14"	SS	Pipe Size	<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
2500	75.5		72 hr.

Pump  Bailer  Air  Flowing  Artesian

Temperature of water **58 F** Depth Artesian Flow Found \_\_\_\_\_  
 Was a water analysis done?  Yes By whom **Golder Assoc.**  
 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** Range **3 W** WM.  
 Section **9 SW** 1/4 **SW** 1/4  
 Tax Lot **700** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) **County Farm Rd.**  
**Eugene, OR**

(10) STATIC WATER LEVEL:  
**53** ft. below land surface. Date **8/30/02**  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found **8'**

From	To	Estimated Flow Rate	SWL
8	177	NA	
186	428	NA	

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

Material	From	To	SWL
Brown Silt	0	7	
Yellowish brown gravel, little sand	7	177	
Yellowish brown silt	177	186	
Olive gray sand and gravel	186	268	
Yellowish brown sandy gravel	268	284	
Greenish black sandy gravel	284	340	
Greenish gray silty gravel	340	343	
Greenish black sand and gravel	343	382	
Greenish gray cemented gravels	410	428	

RECEIVED  
 SEP 19 2002  
 WATER RESOURCES DEPT.  
 SALEM, OREGON

Date started **7/10/02** Completed **8/28/02**  
 (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 **1523**  
 Date **9/17/02**

(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 \_\_\_\_\_ WWC Number **1464**  
 Date **9/17/02**