

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

(START CARD) # 99641

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

(1) OWNER: Well Number 6
Name James H. Welsh
Address 15892 Pasadena Ave. Ste. #220
City Tustin State CA Zip 92780

(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 observed
 Thermal Injection Livestock Other Pest

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 250 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	38'	cement w/ 4% bentonite	0	38'	9
6"	38'	250'				

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	6"	+1'	39'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	/							

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
/							

(8) WELL TESTS: Minimum testing time is 1 hour
well output may fluctuate
 Pump Bailor Air Flowing Artesian
Yield gal/min 12 Drawdown 235 Drill stem at 250 Time 1 hr.

Temperature of water 51 Depth Artesian _____
Was a water analysis done? Yes By whom _____

Did any strata contain water not suitable for intended use?
 Salty Muddy Odor Colored Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Lane Latitude _____ Longitude _____
Township 18 S N or S Range 3 W E or W. WM.
Section 21 SE 1/4 NE 1/4
Tax Lot 200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 32475 Dillard Rd Eugene, OR

(10) STATIC WATER LEVEL:
15 ft. below land surface. Date 7/31/97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 107

From	To	Estimated Flow Rate	SWL
107	108	1	
198	199	+1	15
200	211	+10	15

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	2	
Clay sandy weathered	2	26	
loose blue soft	26	34	15
loose blue firm	34	250	15

RECEIVED

OCT 22 2008

WATER RESOURCES DEPT
SALEM, OREGON

Date started 7/30/97 Completed 7/31/97

(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 Date 8/23/97

L13881

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 Thermal Injection Livestock Other Pezzo

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Special Construction approval Yes No Depth of Completed Well 250 ft.
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 Other _____
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Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	+1'	39'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
/							

(8) WELL TESTS: Minimum testing time is 1 hour
well output may fluctuate

Yield gal/min	Drawdown	Drill stem at	Time	Flowing
12	235	250	1 hr.	<input type="checkbox"/> Artesian

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? Top little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Lane Latitude _____ Longitude _____
Township 18 S N or S Range 3 W E or W. WM _____
Section 21 SE 1/4 NE 1/4 _____
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MAY 02 2003

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Signed Jan Christensen Date 8/23/97