

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

LANE 63577

(WELL I.D.)# L **70552**
 (START CARD)# **165684**

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

(1) OWNER: Well Number _____

Name Lamorini Water Works LLC
 Address 216 Talemena Drive
 City Cottage Grove State OR Zip 97424

(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 260 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12	0	61	Bentonite	0	50	30 sacks
			Cement	50	61	5 sacks
8	61	260				

How was seal placed: Method A B C D E
 Other **Poured**

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	+1	61	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	6	0	260	sch 4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method **Saw**
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
160	260	1/8	150		6"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing	Time
150	total	260	<input type="checkbox"/> Artesian	1 hr.

Temperature of water 56 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 N 43 47.204 Longitude W 123 05.205
 Township 20 S Range 03 W WM
 Section 32 1/4 1/4
 Tax Lot 303 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Nearest Address: 442 Talemena Drive Cottage Grove, OR 97424

(10) STATIC WATER LEVEL:

40 ft. below land surface. Date 6-18-04
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 240'

From	To	Estimated Flow Rate	SWL
240'	245'	150 gpm	40'

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Top Soil	0	3	
Brown Clay	3	52	40
Blue Grey Sandstone	52	260	40

RECEIVED
 JUL 01 2004
 WATER RESOURCES DEPT
 SALEM, OREGON

Date started 6-17-04 Completed 6-18-04

(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 Terry Queen WWC Number 1800 Date 6-18-04

(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 1553 Date 6-18-04