

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

(1) LAND OWNER Well Number 1
Name KING ESTATE WINERY
80854 TERRITORIAL HWY
Address
City EUGENE State OR Zip 97405

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

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 205 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
10"	0	19	BENTONITE	0	19	6 SACKS
6"	19	205				

How was seal placed: Method A B C D E
 Other **POURED AND TAMPED**
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	19	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner 4 1/2"	1	205	PVC	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS
 Perforations Method SAW
 Screens Type LINER Material PLASTIC

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
105	165	2	600	1/8		<input type="checkbox"/>	<input checked="" type="checkbox"/>
125	185	2	600	1/8		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
60	192	205	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 (legal description)
County LANE
Tax Lot 300 Lot _____
Township 20 S Range 5 W WM
Section 1 SE 1/4 NW 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 80854 TERRITORIAL HWY
EUGENE

(10) STATIC WATER LEVEL
13 ft. below land surface. Date 3/22/2005
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 25

From	To	Estimated Flow Rate	SWL
25	30	60	13

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
TOP SOIL	0	2	
BROWN CLAY	2	11	
BLUE CLAYSTONE	11	70	13
BROWN CONGLM.	70	105	
BLUE CLAYSTONE	105	205	

RECEIVED
MAR 25 2005
Casey Jones Well Drilling Co., Inc
37115 Immigrant Road
Pleasant Hill, OR 97455
541-747-2806
WATER RESOURCES DEPT
SALEM, OREGON
Date Started 3/21/2005 Completed 3/22/2005

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, 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 1836 Date 3/23/2005

Signed *[Signature]*

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, 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 1641 Date 3/23/2005

Signed *[Signature]*

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

WELL I.D. # L 75594

START CARD # 173032

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 37115 Immigrant Road
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WWC Number 1836 Date 3/23/2005

Signed _____

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WWC Number 1541 Date 3/23/2005

Signed _____