

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

WELL I.D. # L 85092
START CARD # 186367

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

(1) LAND OWNER Name LAKE HORE WATER DIST / RANDY REITZ Well Number _____
Address 727 WILLSON ST
City EUGENE, OR State OR Zip 97402

(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 98' ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
<u>10" / 7 1/2"</u>	<u>0'</u>	<u>41'</u>	<u>Best.</u>	<u>0'</u>	<u>41'</u>	<u>18 sacks</u>

How was seal placed: Method A B C D E

Other POURED & TAMPED

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER
Casing: Diameter 6" From +2' To 98' Gauge 250 Steel Plastic Welded Threaded

Liner: _____

Drive Shoe used Inside Outside None

Final location of shoe(s) 98'

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>50 GPM</u>	<u>54'</u>	<u>98'</u>	<u>1 HR.</u>

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 109 Lot _____
Township 17S N or S Range 5W E or W WM
Section 29 NW 1/4 SE 1/4

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

Street Address of Well (or nearest address) 2599 1/2 MARINA DR. VENETA, OR. 97487

(10) STATIC WATER LEVEL
44' ft. below land surface. Date 7/26/06
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 59'

From	To	Estimated Flow Rate	SWL
<u>59</u>	<u>98</u>	<u>50 GPM</u>	<u>44'</u>

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
<u>TOPSOIL</u>	<u>0</u>	<u>2</u>	
<u>CLAY - Reddish Brown</u>	<u>2</u>	<u>9</u>	
<u>CLAY - Light Brown</u>	<u>9</u>	<u>28</u>	
<u>CLAY - Tan w/ sand</u>	<u>28</u>	<u>41</u>	
<u>CLAY w/ gravel</u>	<u>41</u>	<u>58</u>	
<u>SAND w/ gravel</u>	<u>58</u>	<u>98</u>	<u>44'</u>
<u>Gravel w/ sand (loose)</u>	<u>98</u>	<u>98</u>	<u>44'</u>

RECEIVED

AUG 08 2006

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 7/25/06 Completed 7/26/06

(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 _____ Date _____

Signed _____

(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 1723 Date 7/26/06

Signed [Signature]