

Lane
70560

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

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

(1) LAND OWNER Name MICHAEL J. BARROW CLIFF Well Number L60242
Address 37151 PARSONS CR. RD
City SPRINGFIELD State OR Zip 97478

(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 125 ft.

Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	18'	BENTONITE	0	18'	8 SACKS
6"	18'	125'				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☒ Other POURED DRY

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'	59'	2.50	☒	☐	☒	☐
Liner:	4"	-7'	125'	1.60	☐	☒	☒	☐

Drive Shoe used ☐ Inside ☐ Outside ☒ None

Final location of shoe(s) 0

(7) PERFORATIONS/SCREENS:

☒ Perforations Method TORCH - SKILL SAW

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
-59'	-39'	1/4x5"	18	6"	2.50	☒	☐
-125'	-65'	1/8x6"	135	4"	1.60	☐	☒

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

Yield gal/min	Drawdown	Drill stem at	Time
30 GPM	100'	125'	1 hr.

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? ☐ Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

WELL I.D. # L60242

START CARD # W201030

(9) LOCATION OF WELL by legal description:

County LANE Latitude _____ Longitude _____

Township 16-S N or S Range 2-W E or W. WM.

Section 11 SE 1/4 SW 1/4

Tax Lot 212 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) NEXT TO 37151 PARSONS CR. RD. SPFLD., OR 97478

(10) STATIC WATER LEVEL:

73' ft. below land surface. Date 6-30-10

Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 100'

From	To	Estimated Flow Rate	SWL
100'	125'	30 GPM	73'

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
TOP SOIL BROWN	0	3	
CLAY BROWN	3	22	
CLAY BROWN, GRAVEL			
SAND	22	90	
CLAY GRAY, GRAVEL			
SAND	90	100	
CLAY BROWN, GRAVEL			
SAND	100	125'	73'

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WATER RESOURCES DEPT
SALEM, OREGON

Date started 6-29-10 Completed 6-30-10

(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 1248

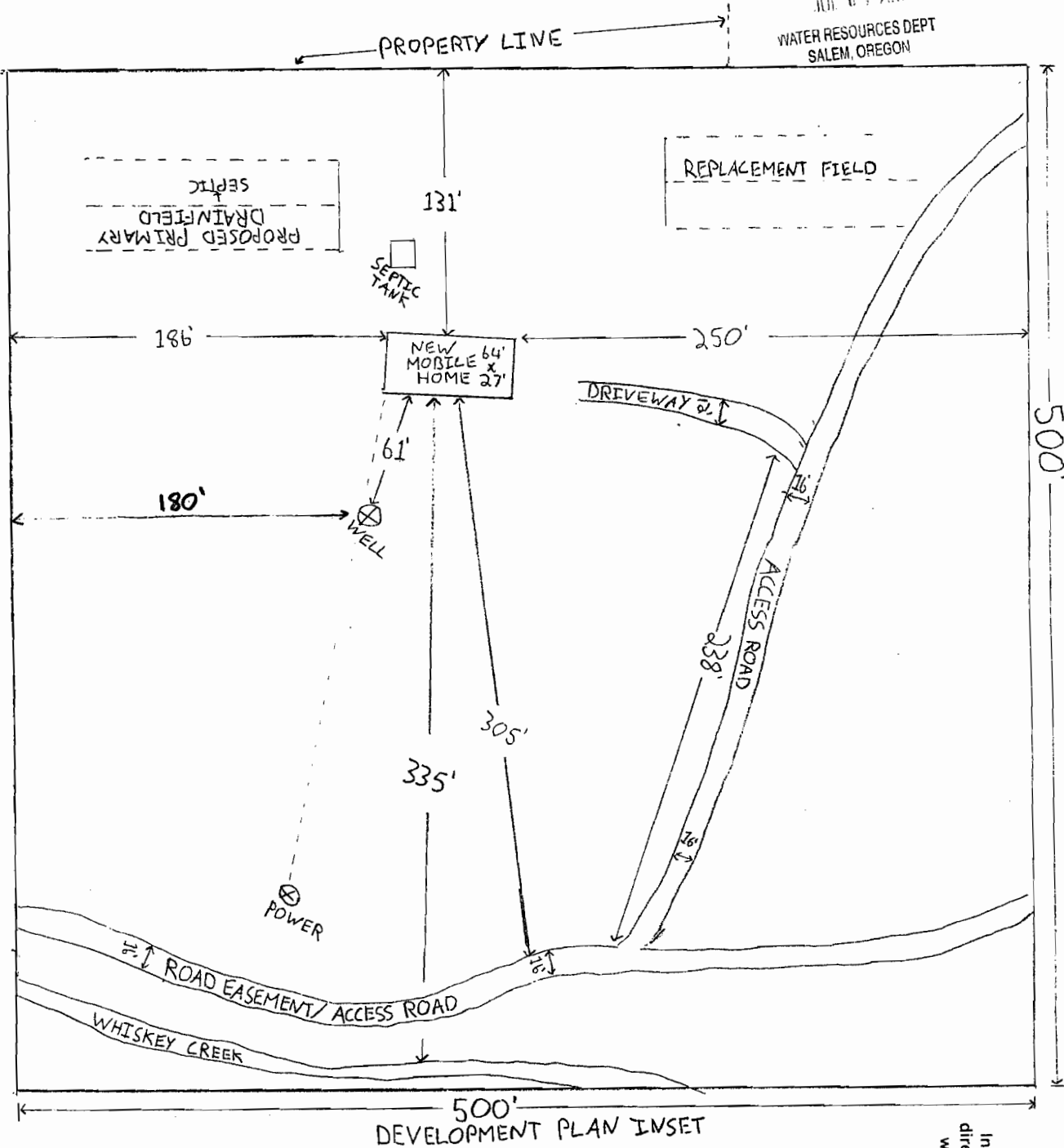
Signed Allen White Date 6-30-10

RE: WELL LOG LANE 70560
 LANE 70560
 SITE PLAN SUBMITTAL FORM

OWNER NAME: MICHAEL BARROWCLIFF	Map and Taxlot #: 16-02-11-00212	APPLICANT NAME: _____
PHONE # 541-933-2146	PHONE # _____	PHONE # _____
ADDRESS: 37145 PARSONS CROWN	ADDRESS: _____	ADDRESS: _____
SPRINGFIELD OR 97478	Scale: 1" = 50'	_____

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 SALEM, OREGON



LAND OWNER SUBMITTED MAP

Indicate which
 direction is north
 with an arrow