

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

WELL I.D. # L 100530

START CARD # 202614

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

(1) LAND OWNER Well Number 6A  
Name Seneca Sawmill Co  
Address PO Box 851  
City Eugene State OR Zip 97440

(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 145 ft.  
Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
18"	0'	3'	bent. chips	0	3	
14"	3'	28'	bent. chips	3	28	
10"	28'	150'				

How was seal placed: Method  A  B  C  D  E  
 Other as per OAR 690-210-340

Backfill placed from 145 ft. to 150 ft. Material 8/12 silica  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing: 12"	+2	3	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
10"	3	65	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9"	75	89	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Liner: 9"	99	109	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
9"	139	145	.250	<input checked="" type="checkbox"/>	<input 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 \_\_\_\_\_  
 Screens Type V Wire Material SS

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
65	75	.023		10"	tele	<input type="checkbox"/>	<input type="checkbox"/>
89	94	.023		10"	tele	<input type="checkbox"/>	<input type="checkbox"/>
94	99	.080		10"	tele	<input type="checkbox"/>	<input type="checkbox"/>
109	119	.044		10"	tele	<input type="checkbox"/>	<input type="checkbox"/>
119	139	.060		10"	tele	<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
525	21.58		1 hour
well output	may fluctuate		

Temperature of water 50 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 2101 Lot \_\_\_\_\_  
Township 17 S Range 4 W WM  
Section 4 SE 1/4 SW 1/4

Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) 90201 Hwy 99 N  
Eugene, OR 97440

(10) STATIC WATER LEVEL  
6.3 ft. below land surface. Date 11/25/09  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES  
Depth at which water was first found 14

From	To	Estimated Flow Rate	SWL
28	75	130	6.3
86	135	395	6.3

(12) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To	SWL
topsoil	0	4	
clay, tan	4	14	
sand/gravels	14	75	6.3
clay/sm. gravels	75	83	6.3
sand, brown, cemented	83	86	6.3
sand/gravels	86	135	6.3
sand, blue gray, cemented	135	150	6.3

water right transfer T10958

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APR 05 2011

WATER RESOURCES DEPT  
SALEM, OREGON

Date Started 9/24/09 Completed 11/25/09

(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.

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WWC Number \_\_\_\_\_ Date \_\_\_\_\_

Signed \_\_\_\_\_

MAY 31 2011

(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.

WATER RESOURCES DEPT  
SALEM, OREGON

WWC Number 636 Date \_\_\_\_\_

Signed \_\_\_\_\_

*Paul Christensen*  
Christensen Well Drilling Co

# LANE 71020

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Signed Frank Christensen  
Christensen Well Drilling Co