

STATE OF OREGON
WATER SUPPLY WELL REPORT

LANE 71979

LANE 71979

(ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 109729
START CARD # 208772
ORIGINAL LOG # _____

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

(1) LANDOWNER Owner Well I.D. #2
First Name Pete Last Name Graepel
Company _____
Address 95102 Ayres Ln
City Junction City State OR Zip 97448

(2) TYPE OF WORK New Conversion Deepening
 Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth _____ ft.
Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

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

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/Commercial Livestock Dewatering Injection
 Thermal Other _____
OCT 24 2012

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 38' ft. Special Standard: Yes (attach copy)

BORE HOLE				SEAL SALEM, OR			
Dia	From	To	Material	From	To	Amount	Scks/lbs
10"	0'	19'	Bentonite	0'	19'	8	scks
6"	19'	38'					

How was seal placed: Method A B C D E
 Other Bentonite Placed @ 1 sck pr. 5 min rate
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Csng	Liner	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		6"		12'	38'	.250	X		X	

Shoe Inside Outside Other Location of shoe(s) NONE
Temporary casing Yes Diameter _____ From _____ To _____

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

Perf	Scm	Csng	Liner	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size
X		X			21'	36'	5/8"	1"	620	

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

Yield gal/min 200 gpm Drawdown _____ Drill stem/Pump depth 38' Duration (hr) 1 Hr

Temperature 56° F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS _____ ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County Lane Twp 15S N of S Range 04W E of W W.M.
Sec 20 SE 1/4 of the SE 1/4 Tax Lot 1901
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Pre-Alteration				
Completed Well	<u>9-18-12</u>			<u>13'</u>

Flowing Artesian? Yes Dry Hole? Yes
WATER BEARING ZONES Depth water was first found 18'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>9-18-12</u>	<u>18'</u>	<u>38'</u>	<u>200 gpm</u>			<u>13'</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
<u>Top Soil</u>		<u>0 3</u>
<u>Brown Clay & Loam</u>		<u>3 10</u>
<u>Cemented Gravel</u>		<u>10 18</u>
<u>Gravel & Sand (Brown)</u>		<u>18 38</u>

RECEIVED BY OWRD
SEP 27 2012
SALEM, OR

Date Started 9-18-12 Completed 9-18-12

(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.

License 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.

License Number 751 Date 9-18-12

Signed Donald J. Fovring
Contact Info. (optional)

Mid Valley Drilling Inc
541-847-5470

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