LANE 73076

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

WELL I.D. # L 102240

START CARD # 207015

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

(1) LAND OWNER Well Number _____
Name **Nathan Cawood**
Address **34496 McKenzie View Drive**
City **Eugene** State **OR** Zip **97408**

(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 **73** ft.
Explosives used: ☐ Yes ☑ No Type _____ Amount _____

BORE HOLE Diameter	From	To	SEAL Material	From	To	Sacks or Pounds
10"	0	20	bent. chips	0	20	8 sacks
6"	20	74				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☑ Other **as per OAR 690-210-340**
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from **24** ft. to **20** ft. Size of gravel **3/4**

(6) CASING/LINER

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6"	+1.5	71.5	.250	☑	☐	☑	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

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

(7) PERFORATIONS/SCREENS
☑ Perforations Method **Star**
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
65	69	3/16	80	6"	pipesize	☑	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Time
17	21	60	1hour

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 **2204** Lot _____
Township **17** S Range **3** W WM
Section **24** **NW** 1/4 **NW** 1/4
Lat _____ ° _____ ' _____ " or _____ (degrees or decimal)
Long _____ ° _____ ' _____ " or _____ (degrees or decimal)
Street Address of Well (or nearest address) **34496 McKenzie View Drive**
Eugene, OR 97408

(10) STATIC WATER LEVEL
39 ft. below land surface. Date **6/28/11**
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found **66**

From	To	Estimated Flow Rate	SWL
66	73	17 gpm	39

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
clay /boulders	0	4	
clay, light brown w/boulders	4	20	
clay, brown w/small boulders	20	66	39
boulders,fractured w/gravels	66	70	39
sand, blue gray w/some gravels	70	73	39

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APR 07 2014
SALEM, OR

Date Started **6/27/11** Completed **6/28/11**

(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 **97** Date _____

Signed _____

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