

(1) LAND OWNER Owner Well I.D. _____
 First Name _____ Last Name _____
 Company WILLAMETTANS
 Address 37000 PARSONS CREEK
 City SPRINGFIELD State OR Zip 97478

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

(2a) PRE-ALTERATION
 Dia + From To Gauge Stl Plstc Wld Thrd
 Casing: _____
 Material From To Amt sacks/lbs
 Seal: _____

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

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

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 300.00 ft.
BORE HOLE SEAL sacks/
 Dia From To Material From To Amt lbs

10	0	30	Bentonite	0	30	13	S
7.25	30	139				Calculated	13.69
5.5	139	300				Calculated	

How was seal placed: Method A B C D E
 Other **POURED AND TAMPED**
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
 Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6	<input checked="" type="checkbox"/>	1.3	139	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4	<input type="checkbox"/>	0	300	CL 160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

 Shoe Inside Outside Other Location of shoe(s) 139
 Temp casing Yes Dia _____ From _____ To _____

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

Perf/ Screen	Casing/ Screen	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Liner	4	82	298	.125	6	198	

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
8		298	1

 Temperature 53 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 140 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
 County LANE Twp 16.00 S N/S Range 2.00 W E/W WM
 Sec 11 NW 1/4 of the SW 1/4 Tax Lot 202
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address
 37000 PARSONS CREEK, SPRINGFIELD, OR 97478

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	8/18/2015			62

 Flowing Artesian? Dry Hole?
 WATER BEARING ZONES Depth water was first found 183.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
8/18/2015	183	234	8			62

(11) WELL LOG Ground Elevation 850.00

Material	From	To
clay red/brown dense	0	38
sand, gravel, boulders	38	44
clay brown sand broken claystone	44	79
clay grey -sandy soft	79	100
claystone brown broken	100	119
clay with broken claystone light grey	119	130
conglomerate grey brown claystone broken	130	134
sandstone very fractured with clay grey	134	183
basalt drk. grey very fract. w/calsite	183	234
sandstone brown fract.	234	240
sandstone grey/brown fract.	240	250
sandstone grey very fract. w/clay	250	260
basalt very fract. w/clay grey	260	291
claystone dark grey	291	300

REVISED
 10:13 am, Mar 03, 2016

Date Started 8/18/2015

(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 1965 Date 9/10/2015
 Signed NEIL LEE (E-filed)
 Contact Info (optional) N W LEE DRILLING, LIC 1965. (541) 933-7956