LANE 74481

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WELL LABEL # L //9720 START CARD # /03042/

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

Instructions for completing this report are on the last page of this form.	, ·
(1) LAND ONNER First Name Company Company Address City State Owner Well I.D. Last Name Las	(9) LOCATION OF WELL (legal description)
Company Premier RV	County
Address 3/00 /ms/4/1/ Rd. City Laburg State Ol Zip 9740B	Sec 33 Skc 1/4 of the 1/4 Tax Lot 1/4 Tax Lot
-	Lat ° ' . "or . DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot Lat "o" "mor DMS or DD Long "o" DMS or DD
Alteration (repair/recondition)	Street Address of Well (or nearest address) 33/00 Unindow Ref.
(3) DRILL METHOD	Lobys, OL. 97408
Rotary Air Rotary Mud Cable Auger Cable Mud	
Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL (ft)
(4) PROPOSED USE Domestic Irrigation Community	Existing Well/Predeepening SwL(ti)
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection ☐ Thermal ☐ Other	Completed Well 5-2-16 - 10'
	Flowing Artesian? Yes Dry Hole? Yes
(5) BORE HOLE CONSTRUCTION Special Standard: Yes (attach copy)	WATER BEARING ZONES Depth water was first found
Depth of Completed Wellft.	SWL Date From To Est Flow SWL (psi) + SWL (ft)
BORE HOLE SEAL	5-2-16 28 39' 75 JAN - 10'
Dia From To Material From To Amount Scks/lbs	
6" 28 39' (2000)	
CARULATED 12 SAKE	
How was seal placed: Method A B C D E	(11) WELL LOG Ground Elevation
Mother Princed & 5 min RATE po 1644	Material From To
Backfill placed from ft. to ft. Material	Small Clay 2 13.
Filter pack from ft. to ft. Material Size	Clay to 15 whe graved 15 24
Explosives used: Yes Type Amount	Ceineries agrice 24 26
(6) CASING/LINER	gravei, swirt, loose 28 39
Csng Linr Dia + From To Gauge Steel Plastic Welded Thrd	
X 6" + 1 39" 790 x	RECEIVED BY OWAD
	MAY 0 6 2016
Shoe Marinside Outside Other Location of shoe(s) 39/197.	SALEM, OB
Temporary casing Yes Diameter From To	
(7) PERFORATIONS/SCREENS	Date Started 4-29-16 Completed 5-2-16
Perforations Method	
Screens Type	(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
Perf Scrn Csng Linr Dia From To width length slots size	construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
	Lie a Mandan
	License Number Date
	Signed
(8) WELL TESTS: Minimum testing time is 1 hour	(bonded) Water Well Constructor Certification
Pump Bailer Air Flowing Artesian	I accept responsibility for the construction, deepening, alteration, or
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water
75 38' 1'12 HAS	supply well construction standards. This report is true to the best of my knowledge
	and belief.
Temperature 52 °F Lab analysis Yes By	License Number 1723 Date 5-3-16
Water quality concerns? Yes (describe below)	
From To Description Amount Units	Signed Contact Info. (optional)
28 40 TDS 356 MM	
-0 70 1 W 350 MM	BILL Q. 541-729-7.059