## STATE OF OREGON WATER SUPPLY WELL REPORT

## **LANE 75796**

WELL I.D. LABEL# L 119718

START CARD # 1036297

ORIGINAL LOG #

(as required by ORS 537.765 & OAR 690-205-0210)	3/22/	2/2018 ORIGINAL LOG #							
(1) LAND OWNER Owner Well I.D. 1									
First Name PAM Last Name STOLGIN	<u> </u>	(9) LOCATION OF WELL (legal description)							
Company OAKES MOBILE HOME PARK		County LANE Twp 18.00 S N/S Range 3.00 W E/W W							
Address 34956 SEAVEY LOOP RD.		Sec 14 SE 1/4 of the SE 1/4 Tax Lot 1702							
City EUGENE State OR Zip 97405  (2) TYPE OF WORK New Well Deepening		Tay Man Number							
(2) TYPE OF WORK New Well Deepening	Conversion	Tax Map Number							
Alteration (complete 2a & 10) Abandoni	nent(complete 5a)	$\frac{1}{1}$ $\frac{1}$							
(2a) PRE-ALTERATION		Street address of well Nearest address							
Casing: To Gauge Stl Plstc Wld	Ihrd	34956 SEAVEY LOOP RD.EUGENE. OR. 97405							
		34930 SEAVET LOOP RD.EUGENE, OR. 97403							
Material From To Amt sacks/lbs Seal:									
(3) DRILL METHOD		(10) STATIC WATER LEVEL							
Rotary Air Rotary Mud Cable Auger Cable	Mud	Date $SWL(psi)$ + $SWL(ft)$							
Reverse Rotary Other	11144	Existing Well / Pre-Alteration							
		Completed Well							
(4) PROPOSED USE  Domestic  Irrigation  Com	munity	Flowing Artesian? Dry Hole?							
Industrial/ Commericial Livestock Dewatering		WATER BEARING ZONES Depth water was first found							
Thermal Injection Other		SWL Date From To Est Flow SWL(psi) + SWL(ft)							
(5) BORE HOLE CONSTRUCTION Special Standar	d (Attach copy)	=							
Depth of Completed Well ft.	I (Attach copy)	'9'							
BORE HOLE SEAL	sacks/								
	To Amt lbs								
	103	<b>╗</b> ┠──┼─┼─┼─┼							
Calcul	ated	_							
		(11) WELL LOG Ground Flavation							
Calcul		Ground Elevation							
How was seal placed: Method A B C	D E	Material From To							
Other									
Backfill placed from ft. to ft. Material									
Filter pack from ft. to ft. Material	_Size	_							
Explosives used: Yes Type Amount		_							
(5a) ABANDONMENT USING UNHYDRATED BENT									
Proposed Amount Actual Amount	ONTE								
1									
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl	Plstc Wld Thrd	d							
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		1							
Shoe Inside Outside Other Location of sho									
(7) PERFORATIONS/SCREENS Perforations Method									
Screens Type Material		Date Started9/16/2017							
Perf/ Casing/ Screen Scrn/slot Slot	# of Tele/	Completed 5/22/2016							
Screen Liner Dia From To width length	slots pipe size								
		I certify that the work I performed on the construction, deepening, alteration,							
		abandonment of this well is in compliance with Oregon water supply we							
		construction standards. Materials used and information reported above are true the best of my knowledge and belief.							
		<b>→ 1</b>							
		License Number Date							
8) WELL TESTS: Minimum testing time is 1 hour		Signed							
Pump Bailer Air Flo	wing Artesian								
Yield gal/min Drawdown Drill stem/Pump depth Dur		(bonded) Water Well Constructor Certification							
22 394 420	24	I accept responsibility for the construction, deepening, alteration, or abandonm							
		work performed on this well during the construction dates reported above. All w							
		performed during this time is in compliance with Oregon water supply w							
Temperature 54 °F Lab analysis Yes By		construction standards. This report is true to the best of my knowledge and belief							
Water quality concerns? Yes (describe below) TDS amount From To Description A	461 ppm	License Number 1723 Date 3/22/2018							
From 10 Description An	mount Units	Signed WILLIAM FIELDED (F. C.) D							
		Signed WILLIAM FIELDER (E-filed)							
		Contact Info (optional)							
		I							

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ORIGINAL LOG #

		F8-							3/22/20	018	OR	IGINAL L	OG#			
	RE-AI	LTERA	TION						Water Q	uality	Concern	ns				
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Ma	aterial		From	To	Amt sack	s/lbs										
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5) BO	RE H	OLE C	ONSTR	UCTION	<u>'</u>				1			R LEVEL				
	ORE H				SEA	AL		sacks/	SWL Dat	te	From	То	Est Flow	SWL(psi)	+ 	SWL(ft)
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6) CAS	SING	/LINE	₹												=	
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7) PEK	RFOR	ATION	NS/SCRI	EENS											=	
		/ Screen	15/5011		Scrn/slot	Slot	# of	Tele/							-	
Screen		Dia	From	То	width	length		pipe size							=	
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									Comme	nts/Re	emarks					
(8) W	ET.T.	ГЕСТС	Minim	ım testir	ng time is	1 hour			Deepened	well fro	om 240 to	440 no more	water was	achieved		
	gal/mir		wdown		m/Pump de		ıration (l	hr)								
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