LANE 76674 WELL I.D. LABEL# I STATE OF OREGON START CARD# WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) **ORIGINAL LOG#** (1) LAND OWNER Owner Well I.D. Last Name Marthez First Name Lee & (9) LOCATION OF WELL (legal description) Range OYW E/W WM Company Tax Lot <u>0/600</u> V = 1/4 of the \angle State Tax Map Number New Well Deepening Conversion (2) TYPE OF DMS or DD Lat Alteration (complete 2a & 10) Abandonment(complete 5a) DMS or DD ' OT Long (2a) PRE-ALTERATION Street address of well Nearest address sacks/lbs <u>Material</u> From Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD Date SWL(ft) SWL(psi) Rotary Air Rotary Mud Cable Auger Existing Well / Pre-Alteration Other Reverse Rotary Completed Well Flowing Artesian? Dry Hole? Domestic XIrrigation (4) PROPOSED USE \rfloor Community Industrial/ Commericial Livestock Dewatering WATER BEARING ZONES Depth water was first found Est Flow SWL(psi) Thermal Injection Other + SWL(ft) To (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) Depth of Completed Well 323 ft. BORE HOLE **SEAL** From Material From lbs 38/ 16 Calculated 15-4 (11) WELL LOG Calculated Ground Elevation How was seal placed: Method Other Benton He lc ∐D From To Material _ ft. to _ Backfill placed from _ Material ft. Material Size Filter pack from ft. to Yes Type Amount Explosives used: (5a) ABANDONMENT USING UNHYDRATED BENTONITE Pounds Actual Amount Proposed Amount (6) CASING/LINER Dia Plstc Casing From To Gauge Wld Thrd 38/2 Was to insufficient Inside Outside Other Location of shoe(s) Temp casing Yes Dia From (7) PERFORATIONS/SCREENS rtorations Method_ Material Date Started Completed Tele/ Scrn/slot # of Slot (unbonded) Water Well Constructor Certification To width length slots pipe size From 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 OWRD

the best of my knowledge and belief.

License Number 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

Signed Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

Flowing Artesian

Duration (hr)

(8) WELL TESTS: Minimum testing time is 1 hour

Bailer

Drawdown

X Air

°F Lab analysis LYes By

Drill stem/Pump depth

Yes (describe below) TDS amount

Description

Pump

Temperature 57

Water quality concerns?