

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

LANE
7717

MAR 05 1990

#1 165/4w/4dc
 (START CARD) # 19480

(1) **OWNER:** Well Number: 509
 Name Rody M. Koon
 Address 93653 River Rd
 City Junction City State OR Zip 97448

(2) **TYPE OF WORK:**
 New Well Deepen Recondition Abandon

(3) **DRILL METHOD**
 Rotary Air Rotary Mud Cable
 Other

(4) **PROPOSED USE:**
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) **BORE HOLE CONSTRUCTION:**
 Special Construction approval Yes No Depth of Completed Well 38 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
16"	0'	18'	Cement	0'	18'	17 Sacks
12"	18'	38'				

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) **CASING/LINER:**

Casing/Liner	Diameter	From	To	Gauge	Material		Type	
					Steel	Plastic	Welded	Threaded
Casing:	12"	1'	38'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 38'

(7) **PERFORATIONS/SCREENS:**
 Perforations Method Air Perforator (S)
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
19'	35'	3/8" X 3/16"	640			<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) **WELL TESTS: Minimum testing time is 1 hour**
 Pump Bailer Air Flowing Artesian
 Yield gal/min 450+ Drawdown _____ Drill stem at _____ Time 2 hr.

Temperature of water _____ 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 by legal description:**
 County Lane Latitude _____ Longitude _____
 Township 165 N or S, Range 4W E or W, WM.
 Section 4 SW 1/4 SE 1/4
 Tax Lot 2802 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 29700 Wickwire Lane, Junction City, OR

(10) **STATIC WATER LEVEL:**
12' ft. below land surface. Date 2/28/90
 Artesian pressure _____ lb. per square inch. Date _____

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

From	To	Estimated Flow Rate	SWL
19'	35'	450+	12'

(12) **WELL LOG:** Ground elevation _____

Material	From	To	SWL
Topsoil	0	1	0
Brown Clay	1	15	0
Brown Clay & Gravel	15	17	0
Sand & Gravel	17	36	12
Brown Clay & Gravel	36	38	12

Date started 2/26/90 Completed 2/28/90

(unbonded) **Water Well Constructor Certification:**
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed R. S. D. M. [Signature] WWC Number 1411
 Date 2/28/90

(bonded) **Water Well Constructor Certification:**
 I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed Donald J. [Signature] WWC Number 751
 Date 2/28/90