

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

LANE 77257

3/22/2020

WELL I.D. LABEL# L 135394
START CARD # 1045124
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D.
First Name Last Name
Company RON'S STUFF LLC
Address 410 CHAMBERS ST
City EUGENE State OR Zip 97402

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

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thrld
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 78.00 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Includes rows for Bentonite Chips and Calculated values.

How was seal placed: Method A B C D E
Backfill placed from 0 ft. to 22 ft. Material BENTONITE
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 Thrld
Shoe Inside Outside Other Location of shoe(s)
Temp casing Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method holte perforator
Screens Type Material
Perf/ Casing/ Screen Dia From To Scrn/slot Slot # of Tele/
width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature 62 °F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 127 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County LANE Twp 16.00 S N/S Range 4.00 W E/W WM
Sec 21 SW 1/4 of the NE 1/4 Tax Lot 100
Tax Map Number Lot
Lat " or 44.16730000 DMS or DD
Long " or -123.17520000 DMS or DD
Street address of well Nearest address
29979 HEATHER OAK DRIVE JUNCTION CITY, OR 97448

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 10/8/2019 9
Flowing Artesian? Dry Hole?

Table: WATER BEARING ZONES. Columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row: 10/8/2019, 22, 59, 200, 9.

(11) WELL LOG
Ground Elevation
Material From To
top soil 0 4
brown clay 4 21
gravel 21 59
gravel with grey clay 59 64
grey clay 64 78

Date Started 10/7/2019 Completed 10/8/2019

(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 1960 Date 3/22/2020
Signed JACOB HOWELL (E-filed)
Contact Info (optional) 541-913-7896