

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

WELL I.D. LABEL # 156362
 START CARD # 217243
 ORIGINAL LOG # _____

(1) **LAND OWNER** Owner Well I.D. _____
 First Name _____ Last Name _____
 Company Lop Ltd, LLC
 Address P.O. Box 96
 City Cottage Grove State OR Zip 97424

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

(2a) **PRE-ALTERATION**
 Dia + From To Gauge Stl Plstc Wld Thrd
 Casing: _____
 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 360 ft.

BORE HOLE			SEAL			sacks/lbs	
Dia	From	To	Material	From	To	Amt	lbs
10"	0	38	Cement	38	0	16	Sacks
6"	38	360				Calculated	12.6
						Calculated	

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☐ 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 BENTONITE**
 Proposed Amount Pounds Actual Amount Pounds

(6) **CASING/LINER**
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
☒ ☒ 6" 2 38 200 ☒ ☒ ☒ ☒
☐ ☐ 4" 0 360 160 ☐ ☐ ☐ ☐
 Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____
 Temp casing ☐ Yes Dia _____ From _____ To _____

(7) **PERFORATIONS/SCREENS** Perforations Method SKILSAW
 Screens Type _____ Material _____
 Perf/S Casing/ Screen
 screen Liner Dia From To Scrn/slot Slot # of Tele/
 From Dia width length slots pipe size
Perf Liner 300 340 16" 10" 64 4"

(8) **WELL TESTS: Minimum testing time is 1 hour**
☐ Pump ☐ Bailor ☒ Air ☐ Flowing Artesian
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
14 360' 2 HRS.
 Temperature 58 °F Lab analysis ☐ Yes By _____
 Water quality concerns? ☐ Yes (describe below) TDS amount 1470 ppm
 From To Description Amount Units

(9) **LOCATION OF WELL (legal description)**
 County Lane Twp 21S N/S Range 3W E/W WM
 Sec 12XXXX 1/4 of the NE 1/4 Tax Lot 00104
 Tax Map Number SW/SE Lot _____
 Lat 43.76768530 " or 43.767562 DMS or DD
 Long -122.99379810 " or -122.9937944 DMS or DD
☐ Street address of well ☒ Nearest address

77401 Mosby Cr Rd. Cottage Grove, OR

(10) **STATIC WATER LEVEL**
 Date SWL (psi) + SWL (ft)
 Existing Well / Pre-Alteration 6/27/25 = 18
 Completed Well _____
 Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 320'
 SWL Date From To Est Flow SWL (psi) + SWL (ft)

<u>6/27/25</u>	<u>320</u>	<u>340</u>	<u>14</u>		<u>18</u>

(11) **WELL LOG** Ground Elevation _____

Material	From	To
Topsoil	0	1
Brown clay	1	6
Brown clay, Gravel, Boulders	6	17
Red/Brown Claystone	17	27
Soft Gray Sandstone	27	31
Blue-Gray Sandstone	31	57
Gray Claystone	57	69
Blue-Gray Sandstone	69	206
Blue, Gray, Pmk Sandstone	206	318
Hard Blue-Gray Sandstone	318	347
Blue, Gray, Pmk Sandstone	347	360

 Seal Placement Date: 6/25/25
 Seal Placement Time: 5:30 PM
 Construction Begin Date: 6/25/25
 Construction Begin Time: 1:30 PM
 Construction End Date: 6/27/25
 Helper: Kevin Fleming
 Date Started 6/25/25 Completed 6/27/25

(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 _____
 Signed _____
 Date NOV 24 2025

(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 1562 Date 11/17/25
 Signed Sean Oldham
 Contact Info (optional) _____

**STATE OF OREGON
WELL LOCATION MAP**

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 43.7676853 Datum: WGS84

Longitude: -122.9937981

Township/Range/Section/Quarter-Quarter Section:

WM 21S 3W 1 SWSE

Address of Well:

77401 MOSBY CREEK RD, COTTAGE GROVE

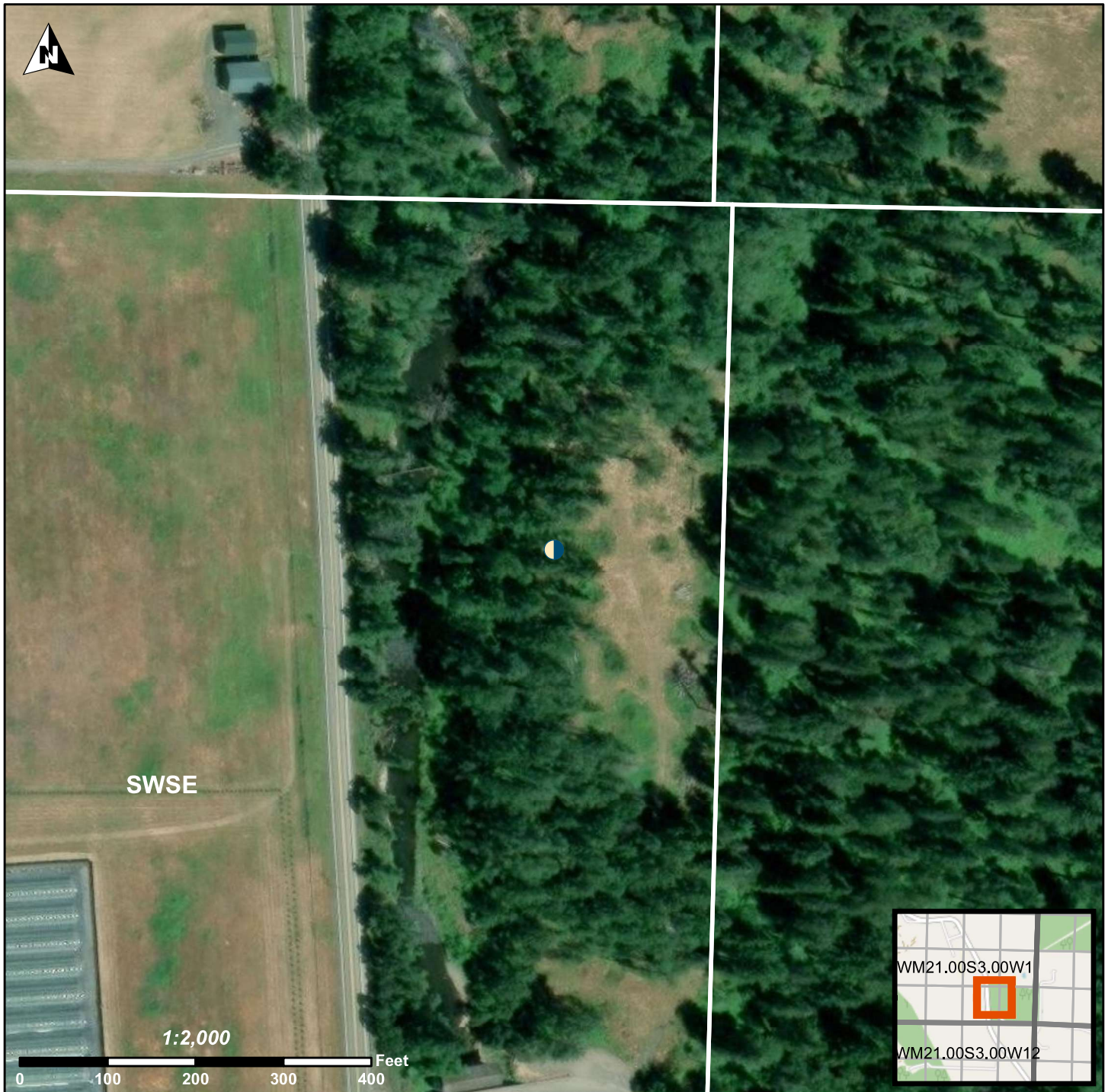
Well Label: L156362

Well Log: LANE 80472

Printed: December 12, 2025

DISCLAIMER: This map is intended to represent the approximate location of the exempt use well provided by the land owner. It is not intended to be construed as survey accurate in any manner.

Generated by OWRD



Received
NOV 24 2025
OWRD

Well
L156362

77666
MOSBY
CREEK RD

77600
MOSBY
CREEK RD

900 800 400 500

200

101

100