Amended 12/12/2025

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

WELL I.D. LABEL# L 156368
START CARD # 217249
ORIGINAL LOG #

LANE 80474

(1) LAND OWNER Owner Well I.D.
First Name John Last Name Hoffman
Company
Address PO Box 1052
City Creswell State OR Zip 97426

(2) TYPE OF WORK [X] 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
[X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE [X] Domestic [ ] Irrigation [ ] Community
[ ] Industrial/ Commericial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION Special Standard [X] (Attach copy)
Depth of Completed Well 165 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs
10"	0	58	Bentonite	58	0	28	sacks
6"	58	165	Calculated			232	
			Calculated				

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[X] Other Bentonite Powed Dry
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
[X]	[ ]	6"		2	58	250	[X]	[ ]	[X]	[ ]
[ ]	[ ]						[ ]	[ ]	[ ]	[ ]
[ ]	[ ]						[ ]	[ ]	[ ]	[ ]
[ ]	[ ]						[ ]	[ ]	[ ]	[ ]
[ ]	[ ]						[ ]	[ ]	[ ]	[ ]

Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s)
Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material

Perf/Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
( ) Pump ( ) Bailer (X) Air ( ) Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
6		165	2 HRS.

Temperature 56 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 69 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County Lane Twp 19 S N/S Range 4W E/W WM
Sec 21 NE 1/4 of the NE 1/4 Tax Lot 00102
Tax Map Number Lot
Lat ° ' " or 43.90957 DMS or DD
Long ° ' " or -123.1692 DMS or DD
[X] Street address of well ( ) Nearest address
29745 Hamm Rd. Creswell, OR 97426

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	9/17/25		=	53

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 84'

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
9/17/25	84	86	5		=	53
9/17/25	137	139	1		=	53

(11) WELL LOG Ground Elevation

Material	From	To
Topsoil	0	2
Red Clay	2	8
Brown Clay	8	13
Chocolate Claystone	13	24
Tan Clay	24	41
Brown Clay	41	52
Blue Gray Sandstone	52	123
Gray Claystone	123	137
Blue Gray Sandstone	137	144
Gray Claystone	144	153
Chocolate Claystone	153	165
Seal Placement Date: 9/16/25		
Seal Placement Time: 5:30 PM		
Construction Begin Date: 9/16/25		
Construction Begin Time: 1:30 PM		
Construction End Date: 9/17/25		
Helper: Kevin Fleming		

Date Started 9/16/25 Completed 9/17/25

(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 Date Received
Signed 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. OWRD
License Number 6562 Date 11/18/25
Signed Sean Oldham
Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.95