

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

**LANE**  
**8066**

JUL 14 1989

**16S/4W/22**  
**7966**

WATER RESOURCES (START CARD) #

**(1) OWNER:**  
 Name Geneva Harwood Well Number: 433  
 Address 91984 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 39 ft.  
 Explosives used  Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
16"	0	18	Cement	0	19	11 Sacks
12"	18	39				

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	Steel		Plastic		Welded	Threaded
					Steel	Plastic	Steel	Plastic		
Casing:	12"	1	39	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input 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"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 39 ft.

**(7) PERFORATIONS/SCREENS:**  
 Perforations Method Torch Cut  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
19	38	8x5	250			<input checked="" type="checkbox"/>	<input type="checkbox"/>

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min \_\_\_\_\_ Drawdown \_\_\_\_\_ Drill stem at \_\_\_\_\_ Time \_\_\_\_\_  
350+ \_\_\_\_\_ 39 ft 3 hrs

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 16S N or S, Range 4W E or W, WM.  
 Section 22 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
 Tax Lot 02401 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 92112 River Rd  
Junction City OR

**(10) STATIC WATER LEVEL:**  
 \_\_\_\_\_ ft. below land surface. Date 6/23/89  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**  
 Depth at which water was first found 19 ft.

From	To	Estimated Flow Rate	SWL
19	38	350+	12

**(12) WELL LOG:** Ground elevation \_\_\_\_\_

Material	From	To	SWL
Brown Clay	0	11	
Cemented Gravel	11	19	12
Sand & Gravel	19	36	12
Cemented Gravel	36	39	12

Date started 6/21/89 Completed 6/23/89

**(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 \_\_\_\_\_ WWC Number \_\_\_\_\_  
 Date \_\_\_\_\_

**(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. Foreing WWC Number 751  
 Date 7/10/89



Oregon Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem Oregon 97301  
 (503) 986-0900  
 www.oregon.gov/owrd

# Application for Well ID Number

*Do not complete if the well already has a Well Identification Number.*

RECEIVED

JUL 5 2024

**I. OWNER INFORMATION**

OWRD

Current Owner Name (please print): Janet Dickinson Russell Living Trust

Mailing Address: 90029 Spires Ln

City, State, Zip: Eugene, OR 97402

Mail Well ID to:  SAME AS ABOVE  In Care Of (C/O)

Name & Address: Jeff Broadie 92112 River Rd

City, State, Zip: Eugene, OR 97402

**II. WELL LOCATION INFORMATION** (Please fill out as completely as possible)

Township: 16S (North / South) Range: 4W (East / West) Section: 22 NW 1/4 of the SW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 2401 County LANE

GPS Coordinates: 44.161792, -123.163760

Street Address of Well, City: 92112 River Rd Eugene, OR 97402

If the property had a different street address in the past: \_\_\_\_\_

**III. GENERAL WELL INFORMATION** (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation

Date Well Constructed (or property built): 1989 Total Well Depth: 39 ft. Casing Diameter: 12"

Owner at time the well was constructed (if known): Harwood Well Report # (if known): LANE 8066

Other Information: \_\_\_\_\_

SUBMITTED BY (please print): Bryce Withers, Water Right Services, LLC

PHONE: 541-408-1400 EMAIL &/or FAX: brycewrs@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.  
 Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

7-5-2024

Well Report Number:

LANE 8066

Well Identification #:

L-155557