

STATE OF OREGON
WATER SUPPLY WELL REPORT

LANE 80803

WELL I.D. LABEL# L

162167

START CARD #

1083496

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

9/10/2026

(1) LAND OWNER

Owner Well I.D. _____

First Name JOBLast Name KREILING

Company _____

Address 83540 SHER KHAN RD.City CRESWELLState ORZip 97426**(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 Thrd

Material From To Amt sacks/lbs

Seal:

(3) DRILL METHOD☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger☐ 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 204.00 ft.

BORE HOLE			SEAL			sacks/lbs	
Dia	From	To	Material	From	To	Amt	lbs
10	0	38	Bentonite	0	38	22	S
6	38	204			Calculated	17.34	
					Calculated		

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: POURED AND TAMPED

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____Seal Placement Begin Date 9/8/2026 Begin Time 13 00**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	6	☒	2	38	0.250	ST	☒		OUT.	38
L	4		4	204	SDR26	PL	☒			

Temp casing ☐ Yes Dia _____ From + ☐ _____ To _____**(7) PERFORATIONS/SCREENS**Perforations Method Saw

Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
Perf	Liner	4	124	144	.125	1	200	
Perf	Liner	4	164	204	.125	1	400	

(8) WELL TESTS: Minimum testing time is 1 hour

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	6		203	1

Temperature 51 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 235 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County LANE Twp 19.00 S N/S Range 3.00 W E/W WMSec 8 NE 1/4 of the SE 1/4 Tax Lot 100

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 43.93019428 DMS or DD

Long _____ ° _____ ' _____ " or -123.06950936 DMS or DD

☒ Street address of well ☐ Nearest address83540 SHER KHAN RD., CRESWELL, OR 97426**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	9/9/2026			25
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 133.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
9/9/2026	133	134	4			25
9/9/2026	150	151	1			25
9/9/2026	190	191	1			25

(11) WELL LOGGround Elevation 556.70 FT

Material	From	To
Top Soil	0	1
Brown Clay	1	32
Red Sandstone	32	47
Basalt	47	88
Red Sandstone	88	105
Basalt	105	127
Red Sandstone	127	133
White Claystone	133	150
Red Claystone	150	190
Red Sandstone	190	204

Construction

Begin Date 9/8/2026 Begin Time 06 42 End Date 9/9/2026**(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 2002 Date 9/10/2026Signed MAXWELL JONES (E-filed)**(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 2002 Date 9/10/2026Signed MAXWELL JONES (E-filed)Drilling Company: Casey Jones Well Drilling Co., Inc.

ORIGINAL - WATER RESOURCES DEPARTMENT

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

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

LANE 80803

9/10/2026

Map of Hole

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: 43.93019428 Datum: WGS84

Longitude: -123.06950936

Township/Range/Section/Quarter-Quarter Section:
WM19.00S3.00W8NESE

Address of Well:

83540 SHER KHAN RD., CRESWELL, OR 97426

Well Label: 162167

Printed: September 10, 2026

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

