

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

WELL I.D. # L 39725
 START CARD # 132909

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number 4
 Name Rose Lodge H2O Co.
 Address P.O. box 137
 City Rose Lodge State Oregon Zip 97372

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 359 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Back pounds	
Diameter	From To	Material	From To	Back	pounds
10"	0 20	bentonite	0 20	16 1/2	
7 1/2"	20 78 1/2	cement w/ 5% bentonite	50 78 1/2	4	
5 1/4"	78 1/2 359	Colum			

How was seal placed: Method A B C D E
 Other bentonite poured, cement troweled + pushed

Backfill placed from _____ ft. to _____ ft. Material w/ plug

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	0	78	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	4	359	1/16	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 78 1/2

(7) PERFORATIONS/SCREENS:

Perforations Method SK/Isaw
 Screens Type _____ Material pvc

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
100	359	6"	110	1/8	4"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
4 1/2 to 5 gpm	300	359	1 hr.

Temperature of water 54° Depth 359 ft.
 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 0 2000
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County Lincoln Latitude _____ Longitude _____
 Township 7 N or S Range 9 E or W WM.
 Section 6 NE 1/4 NW 1/4
 Tax Lot 2000 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Lot 45 Boulder Creek Retreat

(10) STATIC WATER LEVEL:
59 ft. below land surface. Date 6-30-00
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 19'

From	To	Estimated Flow Rate	SWL
19	20	Trace	—
89	119	5	59
129	139	1	59

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Topsoil	0	1	—
Clay, Brown	1	5	—
Boulder, Black	5	8	—
Clay, Brown	8	15	—
Boulder, Black	15	18	—
Clay, Brown	18	44	—
Claystone, Gray	44	51	—
Clay, Brown	51	58	—
Claystone, gray	58	359	59

Dickerson Well Drilling, Inc
PH# 1-800-310-2664

Date started 6-27-00 Completed 6-30-00

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Signed _____ Date _____ WWC Number _____

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed William A. Blair Date _____ WWC Number 1571

WATER RESOURCES DEPT.
 SALEM, OREGON