

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

LINN
 14776

RECEIVED
 OCT 10 1995

125/032/06 BC

(START CARD) # 66281

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

(1) OWNERS: BARENburg Well Number _____
 Name _____
 Address 32080 OLD HWY 34
 City TANGENT State OR Zip _____

(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 73 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Backs or pounds
10"	0	20	BENTONITE	0	20	12
6"	20	73				

How was seal placed: Method A B C D E
 Other DRY 3/8 HOLE AUG
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	+1	73	250	<input checked="" 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"/>

Final location of shoe(s) 73'

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Type	Material	Tele/pipe size	Casing	Liner
<u>None</u>							

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

Pump	Bailer	Air	Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
50	30'		1 hr

Temperature of water 50° 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 LINN Latitude _____ Longitude _____
 Township 12S N or S Range 3W E or W. WM. _____
 Section 6 NW 1/4 SW 1/4 _____
 Tax Lot 1509 Block _____ Subdivision _____
 Street Address of Well (or nearest address) 33477 99E
TANGENT

(10) STATIC WATER LEVEL:
14' ft. below land surface. Date 9/7/95
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 28'

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
BROWN SOIL	0	5	
BROWN CLAY	5	23	
BROWN CLAY & GRAVEL	23	28	
BROWN SILT & GRAVEL	28	41	
Blue clay & GRAVEL	41	45	
BROWN SAND & GRAVEL	45	53	
BROWN CLAY	53	59	
BROWN SAND	59	69	
Lrg GRAVEL & blue sand	69	73	

Date started 9/5/95 Completed 9/7/95

(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.
 WWC Number _____
 Signed _____ 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
 WWC Number 615
 Signed Tad Liddon Date 9/8/95