

STATE OF OREGON  
**WATER SUPPLY WELL REPORT** Well ID# 3139  
(as required by ORS 537.765)

(START CARD) # 102369

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

LINN  
52258

(1) OWNER: Well Number \_\_\_\_\_  
 Name JCK, LLC  
 Address 41394 Kingston Jordan Rd.  
 City Stayton State OR Zip 97383

(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 143 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
Not changed						

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>8</u>	existing			<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not changed							
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method air rotary  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
37	57	.2x1	600			<input checked="" type="checkbox"/>	<input type="checkbox"/>
57	75	.2x1	360			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailer  Air  Artesian

Yield gal/min	Drawdown	Drill stem at	Time
25	8		1 hr.

Temperature of water 53°F 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 9S N or S Range 1W E or W. WM.  
 Section 15 SW 1/4 SE 1/4  
 Tax Lot 1800 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 41579 Stayton Scio Rd.  
Stayton, OR 97383

(10) STATIC WATER LEVEL:  
16.8 ft. below land surface. Date 4/22/98  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
N.A. - No drilling			

(12) WELL LOG:  
 Ground Elevation 435±

Material	From	To	SWL
No new drilling			
Previous start card Nos. 81210 & 86233			
Only alteration was additional perforations per (7).			

Date started 4/22/98 Completed 4/23/98

(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 [Signature] WWC Number 1633 Date 6/19/98

(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 [Signature] WWC Number 649 Date 6/19/98