

STATE OF OREGON  
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 46173  
START CARD # 137564

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

(1) LAND OWNER  
Name LEBANON Community FOUNDATION Well Number DR-1562  
Address 813 MAIN ST.  
City LEBANON State ORE Zip 97355

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

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
10"	0	20	Cement	0	20	24 SACKS	
6"	20	163					

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: 6"	+1	139	.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"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) 139

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
30+		135	1 hr.

Temperature of water 53° Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  Yes By whom ANALYTICAL LAB  
Did any strata contain water not suitable for intended use?  NO  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County LINN Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 12 N of S Range 2 W of W.M.  
Section 24 NE 1/4 SW 1/4  
Tax Lot 206 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) South Santiam Hwy  
LEBANON, ORE 97355

(10) STATIC WATER LEVEL:  
8 ft. below land surface. Date 4-25-01  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 30'

From	To	Estimated Flow Rate	SWL
30	163	30 + gpm	8'

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
TOP SOIL	0	1	
CLAY-BROWN w/ GRAVEL	1	20	
GRAVEL - Cemented	20	30	
SAND & GRAVEL	30	48	8'
CLAY-BROWN	48	51	
GRAVEL w/ SAND	51	122	8'
GRAVEL	122	163	8'

**RECEIVED**

MAY 29 2001

WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 4-18-01 Completed 4-25-01

(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 Joe Williams WWC Number 1667 Date 5-23-01

(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 Phil D. [Signature] WWC Number 664 Date 5-23-01