

STATE OF OREGON  
**WATER SUPPLY WELL REPORT.**

(as required by ORS 537.765)

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

**(1) OWNER:** Well Number: **52346**  
 Name **William Krauss**  
 Address **43425 Hwy 226**  
 City **Scio** State **OR** Zip **97374**

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

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

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

**(5) BORE HOLE CONSTRUCTION:**  
 Special Construction approval Yes  No  Depth of Completed Well **203** ft.  
 Explosives used Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount	
Diameter	From	To	Material	From	To	sacks or pounds	
10	0	5	hole plug	0	5	2 50lb	
10	5	40	cement	5	39	12 94lbs	
6	40	203					

How was seal placed: Method A  B  X C  D  E   
 X Other **poured & probed**  
 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	+1.5	39	250	X		X	

Liner: 4 3 203 160 X X

Final location of shoe(s) **39**

**(7) PERFORATIONS/SCREENS:**

X Perforations		Method		skillsaw orig liner insta	
From	To	Slot size	Number	Diameter	Tele/pipe size
20	205	.25x7	360	7	4

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

Pump	Bailer	X Air	Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
30+		180	1 hr.

Temperature of Water **56** 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  X Other **bacteria**  
 Depth of strata: **0-20**

**(9) LOCATION OF WELL by legal description:**  
 County **Linn** Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township **9S** N or S. Range **1E** E or W. of WM. \_\_\_\_\_  
 Section **34** **SW** 1/4 **NE** 1/4 \_\_\_\_\_  
 Tax lot **102** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) **same**

**(10) STATIC WATER LEVEL:**  
**16** ft. below land surface. Date **2/14/02**  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**  
 Depth at which water was first found **16**

From	To	Estimated Flow Rate	SWL
16	203	30+	16

**(12) WELL LOG:**

Material	From	To	SWL
Clay silty & sticky	0		
brown & tan with cobbles		13	
sandstone conglomerated grey & green broken	13	28	
sandstone grey firm	28	39	
see original well log recorded	39		
Linn 4370		203	16

Removed existing 16ft of 6" casing & rebuilt well

RECEIVED

MAR 01 2002

WATER RESOURCES DEPT.  
 SALEM, OREGON

Date started **2/15/2002**

Completed **2/15/2002**

**(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 my best knowledge and belief.

Signed *[Signature]* WWC Number **1725**  
 Date **2/15/2002**  
**Mack Drilling Company, Inc.**

**(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 **1394**  
 Date **2/15/2002**  
**Mack Drilling Company, Inc.**