

**STATE OF OREGON
WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

(WELL I.D.)# **L 65073**

(START CARD) # **163784**

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

(1) OWNER: Well Number **3915**

Name **Bob Forson**

Address **38750 S. Ruby Loop**

City **Scio** State **Oregon** Zip **97374**

(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 **205** ft.

Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10	0	20	Bentonite	0	20	13 sacks
6	20	205				

How was seal placed: Method A B C D E

Other **Poured dry**

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	98.5	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)

(7) PERFORATIONS/SCREENS:

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

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
38 gpm		205	1 hr.

Temperature of water **52** 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 **10** S Range **2** W WM.

Section **35** SW 1/4 NW 1/4

Tax Lot **400** Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) **38754 S. Ruby Loop**

Scio, OR 97374

(10) STATIC WATER LEVEL:

55 ft. below land surface. Date **4/02/04**

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found **103**

From	To	Estimated Flow Rate	SWL
103	200	38 gpm	55

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Topsoil	0	2	
Broken basalt & clay	2	10	
Black basalt	10	30	
Broken black basalt	30	93	
Grey sandstone	93	205	55

RECEIVED

APR 08 2004

WATER RESOURCES DEPT
SALEM, OREGON

JONES DRILLING CO., INC.
29400 SANTIAM HWY.
LEBANON, OR 97355
541-367-2560 541-451-2686
1-800-915-8388

Date started **4/02/04** Completed **4/02/04**

(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  WWC Number **1411** Date **4/06/04**

(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  WWC Number **1684** Date **4/06/04**