

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

(WELL I.D.)# L **86270**  
 (START CARD) # **191122**

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

(1) OWNER: Well Number **4780**  
 Name **Jim Cate**  
 Address **34750 Santiam Hwy.**  
 City **Lebanon** State **Oregon** 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 **182** ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
20	0	7	Bentonite	0	7	8 sacks
16	0	50	Cement	0	50	28 sacks
12	50	200				

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	12	+1	99	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:

From	To	Slot size	Number	Diameter	Material	Tele/pipe size	Casing	Liner

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Air	Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
1200		160	1 hr.

Temperature of water **54** 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 **11** S Range **2** W WM.  
 Section **34** SW 1/4 NE 1/4  
 Tax Lot **100** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) **Kgal Dr.**  
**Lebanon, OR 97355**

(10) STATIC WATER LEVEL:  
**6** ft. below land surface. Date **11/22/2006**  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found **90**

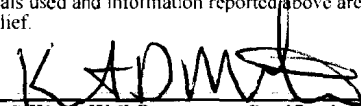
From	To	Estimated Flow Rate	SWL
90	165	1500+	6

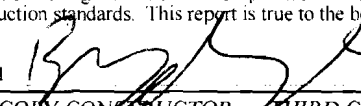
(12) WELL LOG:

Material	From	To	SWL
Topsoil	0	2	
Brown clay	2	7	
Cemented clay & gravel	7	39	
Blue clay	39	90	
Black cemented sand	90	100	6
Blue clay	100	120	
Blue sand & gravel	120	145	6
Blue clay	145	155	
Cemented sand & pea gravel	155	165	6
Blue clay	165	200	

Drilled to 200' caved back to 182'  
**JONES DRILLING CO., INC.**  
**29400 SANTIAM HWY.**  
**LEBANON, OR 97355**  
**541-367-2560 541-451-2686**  
**1-800-915-8388**

**RECEIVED**  
**NOV 29 2006**  
**WATER RESOURCES DEPT**  
**SALEM, OREGON**

Date started **11/17/2006** Completed **11/22/2006**  
 (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 **11/27/2006**

(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 **11/27/2006**