

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

(WELL I.D.)# L 87026

(START CARD) # 191130

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

(1) OWNER: Well Number 4788
Name Carl Thompson
Address 33509 Mill View Way
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 75 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds	
10	0	18	Bentonite	0	18	9 sacks	
6	18	50					
8	50	59	Cement	50	59	2 sacks	
6	18	75					

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	59	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

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

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

	Pump	Bailer	☒ Air	☐ Artesian
Yield gal/min	Drawdown	Drill stem at	Time	
50		75	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 12 S Range 2 W WM.
Section 3 SE 1/4 SW 1/4
Tax Lot 1200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 33509 Mill View Way
Lebanon, OR 97355

(10) STATIC WATER LEVEL:
9 ft. below land surface. Date 1/23/2007
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 18

From	To	Estimated Flow Rate	SWL
18	40	20	9
62	65	50+	9

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	2	
Brown clay	2	10	
Cemented clay & gravel	10	44	
Bleu clay	44	62	
Sand & gravel	62	65	9
Blue clay	65	75	

RECEIVED

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

JAN 30 2007
WATER RESOURCES DEPT
SALEM, OREGON

Date started 1/22/2007 Completed 1/23/2007

(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 1411
Date 1/25/2007

(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 1684
Date 1/25/2007