## **LINN 60537**

## STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

Revised	1

WELL LABEL # L	110124
COLUMN CLUMN	Tionno is

(1) LAND OWNER Owner Well I.D. 5357	(9) LOCATION OF WELL (legal description)		
First Name Thomas Last Name Avinelix	County LINN Twp 10 S N/S Range 2 W E/W WM		
Company Quiet Meadows Farm	Sec 17 NW 1/4 of the SW 1/4 Tax Lot 300		
Address 38615 Densmore Rd.	Tax Map Number Lot		
City Jefferson State OR Zip 97352	Tax Map Number Lot Lat or DMS or DD		
(2) TYPE OF WORK New Well Deepening Conversion	Long " or DMS or DD		
Alteration (repair/recondition) Abandonment	Street address of well Nearest address		
(3) DRILL METHOD	38615 Densmore Rd. Jefferson, OR 97352		
Rotary Air	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)		
	Existing Well / Predeepening		
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 09-03-2013 5		
Industrial/Commericial Livestock Dewatering	Flowing Artesian? Dry Hole?		
Thermal Injection Other	WATER BEARING ZONES Depth water was first found 20		
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy	SWL Date From To Est Flow SWL(psi) + SWL(ft)		
Depth of Completed Well 59 ft.	09-03-2013 20 59 600+ 5		
BORE HOLE SEAL sacks/			
Dia         From         To         Material         From         To         Amt         lbs           16         1         59         Bentonite         0         18         42         S			
10 1 37 Denomic 0 16 42 3			
	(4) WELL LOC		
	(11) WELL LOG Ground Elevation		
How was seal placed: Method A B C D E	Material From To		
Other Poured dry	Topsoil 0 2		
Backfill placed from ft. to ft. Material	Brown clay   2   15   Black sand   15   30		
Filter pack from 18 ft. to 32 ft. Material washed rock Size 3/4&1/2	Black sand   15   30		
Explosives used: Yes Type Amount	Gravel and sand cemented 48 54		
(6) CASING/LINER	Sand & Gravel 54 60		
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd			
● 12 × 1 59 250 ● ○ ×	Naturally caved gravel pack rock		
	from 32 + 59		
	BECEIVED BY OV		
	JONES DRILLING CO., INC.		
Shoe Inside Outside Other Location of shoe(s)	29400 SANTIAM HWY.		
Temp casing X Yes Dia 16 From 0 To 59	LEBANON, OR 97355 SEP-18-2018		
(7) PERFORATIONS/SCREENS	LEBANON, OK 77333		
Perforations Method Torch cut	541-367-2560 541-451-2686		
Screens Type Material	1-800-915-8388 SALEM, OR		
Perf/S Casing/ Screen Scm/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	Date Started 08-30-2013 Completed 09-03-2013		
Perf         Casing         12         32         59         .438         10         325	(unbonded) Water Well Constructor Certification		
	I certify that the work I performed on the construction, deepening, 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.		
(O) WELL TECTS Many and the state of the sta			
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1888 Date 09-17-2013		
Pump Bailer • Air Flowing Artesian	Password : (if filing electronically)		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	- J. W. J. W.		
600 t 50 2	(bonded) Water Well Constructor Certification		
	I accept responsibility for the construction, deepening, alteration, or abandonment		
Temperature 53 °F Lab analysis Yes By	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		
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.		
Water quality concerns? Yes (describe below)  From To Description Amount Units  License Ni 197097 1681 Date 09-17-2013			
Password (i) filling cleanly lically			
	Signed		
	Contact Info (optional) jonesd Min Mother an con		
ORIGINAL - WATER RESOURCES DEPARTMENT THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK			
Form Version: 0.95			

## **LINN 60537**

## STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L	110124
START CARD#	1020945

(1) I AND OWNED Owner Well ID 5257		
(1) LAND OWNER Owner Well I.D. 5357	(9) LOCATION OF WELL (legal description)	
First Name Last Name	County LINN Twp 10 S N/S Range 2 W E/W WM	
Company Riverbend Organic Farms	Sec <u>17 NW 1/4 of the SW 1/4 Tax Lot 300</u>	
Address 35711 Helms Dr.	Tax Map Number Lot	
City Jefferson State OR Zip 97352	Lat Omega DMS or DD	
(2) TYPE OF WORK New Well Deepening Conversion	Long or DMS or DD	
Alteration (repair/recondition) Abandonment	Street address of well Nearest address	
	38615 Densmore Rd., Jefferson, OR 97352	
(3) DRILL METHOD		
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)	
Reverse Rotary Other		
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening Completed Well 09-03-2013 5	
Industrial/ Commercial Livestock Dewatering	Flowing Artesian? Dry Hole?	
Thermal Injection Other	WATER BEARING ZONES Depth water was first found 20	
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)		
Depth of Completed Well 59 ft.	SWL Date   From   To   Est Flow SWL(psi)   + SWL(ft)	
BORE HOLE SEAL sacks/		
Dia From To Material From To Amt Ibs		
16 1 59 Bentonite 0 18 42 S		
	(11) WELL LOG Ground Flevetion	
How was seal placed: Method A B C D E	Glound Elevation	
	Material From To Topsoil 0 2	
X Other Poured dry  Backfill placed from ft. to ft. Material	Brown clay 2 15	
Filter pack from 18 ft. to 32 ft. Material washed rock Size 3/4&1/2	Black sand 15 30	
	Sand & gravel 30 48	
Explosives used: Yes Type Amount	Gravel and sand cemented 48 54	
(6) CASING/LINER	Sand & gravel 54 60	
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Naturally and analysis and	
○	Naturally caved gravel pack rock from 32 + 59	
	Min 32 v 3)	
	WED DY OWED	
	RECEIVED BY OWRD	
Shoe Inside Outside Other Location of shoe(s)	JONES DRILLING CO., INC.	
□ <u> </u>	29400 SANTIAM HWY.   GEP   2 2013	
Temp casing X Yes Dia 16 From 0 To 59	LEBANON, OR 97355	
(7) PERFORATIONS/SCREENS	541-367-2560 541-451-2686	
Perforations Method Torch cut	I CALEMIOH	
Screens Type Material	1-800-915-8388 SALCIVI, OTT	
Perf/S Casing/Screen Scrm/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	Date Started         08-30-2013         Completed         09-03-2013	
Perf   Casing   12   32   59   438   10   325	(nnbonded) Water Well Constructor Certification	
	I certify that the work I performed on the construction, deepening, 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.	
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1888 Date 09-09-2013	
Pump Bailer • Air Flowing Artesian	Password: (if filing-electronisally) Signed	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)		
600+ 50 2	(bonded) Water Well Constructor Certification	
	I accept responsibility for the construction, deepening, alteration, or abandonment	
T	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		
Water quality concerns? Yes (describe below)  From To Description Amount Units  License Number 1684 Date 09-09-2013		
	Password: (if filying electronically)	
	Signed M	
	Contact Info (optional) jop sdrilling@hotmail.com	
ODICINAL WATER RESOURCES D	The order	