

(1) **LAND OWNER** Owner Well I.D. DR-3243-8  
 First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Company NATHAN BIRKY  
 Address P.O. Box 225  
 City Craigton State ORE Zip 97335

(2) **TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

(2a) **PRE-ALTERATION**  
 Casing: Dia + From To Gauge Stl Plstc Wld Thrd  
 Material From To Amt sacks/lbs  
 Seal: \_\_\_\_\_

(3) **DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other RIG NOT USED

(4) **PROPOSED USE**  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other \_\_\_\_\_

(5) **BORE HOLE CONSTRUCTION** Special Standard  (Attach copy)  
 Depth of Completed Well 26' ft.  
 BORE HOLE SEAL sacks/lbs  
 Dia From To Material From To Amt  

10"	0	26	BENTONITE	0	8	20 SXS
						Calculated 16 SXS

 How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
 Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

(5a) **ABANDONMENT USING UNHYDRATED BENTONITE**  
 Proposed Amount Pounds Actual Amount Pounds

(6) **CASING/LINER**  
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd  

<input checked="" type="checkbox"/>	<input type="checkbox"/>	10"	+	2'	8'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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 Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_  
 Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) **PERFORATIONS/SCREENS**  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_  

Perf/S green	Casing/ Liner	Screen Dia	From	To	Scm/slot width	Slot length	# of slots	Tele/ pipe size

(8) **WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)  


 Temperature \_\_\_\_\_ °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount  
 From To Description Amount Units  


(9) **LOCATION OF WELL (legal description)**  
 County LINN Twp 11  N/S Range 2  S/WM  
 Sec 34 NE 1/4 of the SE 1/4 Tax Lot 1400  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address

1/2 mile DOWN K-6AL DR - RIGHT OFF HWY

(10) **STATIC WATER LEVEL** 20  

Existing Well / Pre-Alteration Completed Well	Date	SWL (psi)	+ SWL (ft)

 Flowing Artesian?  Dry Hole?   
 WATER BEARING ZONES Depth water was first found \_\_\_\_\_  
 SWL Date From **RECEIVED BY OWRD** Es Flow SWL (psi) + SWL (ft)  


**APR 13 2017**  
**SALEM, OR**

(11) **WELL LOG** Ground Elevation \_\_\_\_\_  

Material	From	To
EXTENDED 10" CASING, FROM - 8 FEET to + 2' IN PIT.		
INSTALLED 12' SQA TUB. 18" DIAMETER OVER 10" CASING		
INSTALLED 20 SXS BENTONITE BETWEEN 18" & 10" CASING.		
OWNER FILL PIT IN AROUND CASING.		
ONE - BIG WELD-ON extension		

Date Started 3-4-17 Completed 3-4-17

(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.  
 License Number 1974 Date 3-15-17  
 Signed C.J. Nugent

(bonded) **Water Well Constructor Certification**  
 I accept responsibility for the construction, deepening, 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.  
 License Number 664 Date 3-15-17  
 Signed Charles D. Nugent  
 Contact Info (optional) \_\_\_\_\_