

LINN 62988

(1) LAND OWNER

Well Number _____

Name Jean & Elmer Horning

Address Box 216

City Brownsville State OR Zip _____

(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 65 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	

How was seal placed: Method A B C D E
 Other _____

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:	<u>6"</u>	<u>0</u>	<u>65</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____

Screens Type _____ Material _____

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

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

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

Temperature of water _____ 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 13 S N or S Range 3 W E or WM.
Section 35 NE 1/4 SE 1/4
Tax Lot 500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 27501 Fisher Rd, Halsey

(10) STATIC WATER LEVEL:

_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL

Date started _____ Completed _____

SOURCE OF DATA/INFO Water right file G-2403. Form A indicator well was drilled pre-1955. No well log found. This is the well on certificate 36655

COMPILED BY: Karl Wozniak
Groundwater Section

DATE: 1-14-2020