

**STATE OF OREGON
WATER SUPPLY WELL REPORT**

LINN 65247

WELL I.D. LABEL# L

162550

START CARD #

1083367

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

9/18/2026

(1) LAND OWNER

Owner Well I.D. 6817

First Name SARAH

Last Name LEWIS

Company GRIFFITH BLACKMON

Address 30222 WAPITI LN.

City LEBANON

State OR

Zip 97355

(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
☐ Reverse Rotary ☐ Other _____
(4) PROPOSED USE☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____
(5) BORE HOLE CONSTRUCTIONSpecial Standard ☐ (Attach copy)

Depth of Completed Well 400.00 ft.

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amt	sacks/lbs
10	0	40	Bentonite	0	40	22	S
6	40	400			Calculated	19	
					Calculated		

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: POURED DRY

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____

Seal Placement Begin Date 9/16/2026 Begin Time 17:00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	6	☒	1.5	40	0.250	ST	☒			
L	4.5		0	400	Sch40	PL	☒			

Temp casing ☐ Yes Dia _____ From + _____ To _____**(7) PERFORATIONS/SCREENS**

Perforations Method Drilled 1/4" holes

Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
Perf	Liner	4.5	20	400	.25	0.25	2000	

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	2		389	1

Temperature 52 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 140 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County LINN Twp 13.00 S N/S Range 1.00 W E/W WM

Sec 6 SE 1/4 of the NW 1/4 Tax Lot 312

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 44.47187200 DMS or DD

Long _____ ° _____ ' _____ " or -122.85990100 DMS or DD

☒ Street address of well ☐ Nearest address

30222 WAPITI LN. - LEBANON, OR 97355

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	9/17/2026			13.5
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 58.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
9/15/2026	58	59	0.3			13.5
9/16/2026	140	160	1.8			13.5

(11) WELL LOG

Ground Elevation 819.84 FT

Material	From	To
Top soil	0	2
Brown clay	2	10
Gray basalt	10	15
Broken gray basalt	15	22
Gray basalt	22	30
Red cinder	30	34
Gray basalt	34	57
Red basalt	57	58
Gray basalt	58	59
Blue gray sandstone	59	92
Blue sandstone	92	101
Gray basalt	101	135
Gray claystone	135	170
Gray basalt fractured	170	190
Red basalt	190	200
Gray basalt	200	340
Hard gray claystone	340	362
Fractured gray sandstone	362	365
Gray claystone firm	365	400

Construction

Begin Date 9/15/2026 Begin Time 09:00 End Date 9/17/2026

(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 1888 Date 9/18/2026

Signed KENNETH GILLET (E-filed)

(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 1684 Date 9/18/2026

Signed BRET JONES (E-filed)

Drilling Company: Jones Drilling Co., Inc.

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

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9/18/2026

Map of Hole

