

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

**LINN**  
**9690**

NOV 27 1987

WATER RESOURCES DEPT.  
 OREGON

125/1W-31  
 Deep.

**(1) OWNER:** Owner's Well Number: 2037  
 Name City of Sodaville  
 Address 30723 Sodaville Rd.  
 City Lebanon State Or Zip 97355

**(2) TYPE OF WORK:**  
 New Well  Deepen  Recondition  Abandon

**(3) DRILL METHOD:**  
 Rotary Air  Rotary Mud  Cable  Other

**(4) PROPOSED USE:**  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Other

**(5) BORE HOLE CONSTRUCTION:**  
 Depth of Completed Well 405 ft.  
 Special Standards date of approval \_\_\_\_\_

HOLE Diameter	From	To	SEAL		Amount sacks or pounds
			Material	To	
6"	0	405	Bore		

How was seal placed? Method  A  B  C  D  E  
 Other Undisturbed  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

**(6) CASING/LINER:**

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: <u>None Installed</u>				<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"/>

Final location of shoe(s) N/A

**(7) PERFORATIONS/SCREENS:**

From	To	Slot size	Number	Diameter	Tele/pipe size	Material		
						Casing	Liner	
None							<input type="checkbox"/>	<input type="checkbox"/>

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min 45 Pumping level \_\_\_\_\_ Drill stem at 405 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 12S N or S, Range 1W E or W, WM.  
 Section 31 1/4 1/4  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) Top of Ridge-above Sodaville springs

**(10) STATIC WATER LEVEL:**  
100 ft. below land surface. Date 10/26/87  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WELL LOG:** Ground elevation \_\_\_\_\_

Material	From	To	WB?	SWL
Basalt	200	290		
Blue Claystone	290	295		
Basalt	295	315		
Red Claystone	315	325		
Basalt	325	350		
Blue Claystone	350	360		
Basalt	360	405		

Date started 10/24/87 Completed 10/24/87

**(unbonded) Water Well Constructor Certification:**  
 I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.  
 Signed Claude Selby Date 10/30/87

**(bonded) Water Well Constructor Certification:**  
 I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.  
 Signed Best D Jones Date 11/10/87  
 Company JONES DRILLING CO., INC. Co. Job No. \_\_\_\_\_