

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number _____
 Name **Brian Dupont**
 Address **20967 Yukon St.**
 City **Aurora** State **OR** Zip **97002**

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other _____

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
 Depth of Completed Well **179** ft.
 Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
10"	0	55'	Bentonite	0	9'	9 Sacks
6"	55'	179'	Cement	9'	54'	55 Sacks

How was seal placed: Method A B C D E
 Other **Bentonite Placed Dry**
 Backfill placed from **179** ft. to **180** ft. Material **8/12 Sand**
 Gravel placed from **112** ft. to **179** ft. Size of gravel **8-12 CSS**

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	+1.5'	157.5'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	112'	153'	200	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Screwed

Drive Shoe used Inside Outside None
 Final location of shoe(s) **157.5'**

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type **V-Wire** Material **S/S**

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
153'	178'	.040		4"	p/s	<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
58	10'		1 Hr

Temperature of water **56** 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 (legal description)
 County **Marion**
 Tax Lot **400** Lot _____
 Township **4** S Range **1** W WM
 Section **19** NE 1/4 SW 1/4

Lat _____ " or _____ (degrees or decimal)
 Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) **9767 Lariat Lane**
Aurora, OR 97002

(10) STATIC WATER LEVEL
24 ft. below land surface. Date **04/24/2014**
 _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
 Depth at which water was first found **14'**

From	To	Estimated Flow Rate	SWL
143'	178'	150+ gpm	24'

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Topsoil	0	2	
Clay Brown	2	9	
Silty Sand Brown	9	14	
Sandy Silt Grey	14	33	
Silty Grey Clay	33	57	
Clay Grey Silty	57	64	
Clay Grey Sticky	64	73	
Clay Grey Sandy	73	96	
Clay Green	96	98	
Clay Grey Sandy	98	107	
Clay Grey w/some Gravel & Sand	107	129	
Clay Green w/Gravel	129	137	
Clay Grey	137	143	
Sand Grey Fine	143	150	
Gravel & Sand Medium Tight	150	156	
Sand Brown Fine w/Silt & Wood	156	161	

Date Started **04/08/2014** Completed **04/25/2014**

(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.

WWC Number _____ Date _____
SALEM, OR
 Signed _____

(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.

WWC Number **688** Date **04/29/2014**
 Signed **Steven M. Stuebe**

