

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 68856
START CARD # 163044

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

(1) LAND OWNER Well Number _____
Name CITY OF INDEPENDENCE
Address P.O. Box 7
City INDEPENDENCE State OR. Zip 97351

(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 Municipal

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 61 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12"	0'	61'	CEMENT	0'	35'	35 SACKS
			BENTONITE	0'	1'	1 SACK

How was seal placed: Method A B C D E
 Other Dry bentonite poured
Backfill placed from 38 ft. to 35 ft. Material 1/4" crush'd rk.
Gravel placed from 61 ft. to 38 ft. Size of gravel 1/2" x 1/4"

(6) CASING/LINER:
Diameter From To Gauge Steel Plastic Welded Threaded
Casing: 8" 13' 41' .250"
8" 56' 61' .250"
Liner: _____
Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type V-SLOT Material 304 S. Steel
From To Slot size Number Diameter Tele/pipe size Casing Liner
41' 56' 100 _____ 8" PS

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 500 GPM Drawdown 5' - 2 1/4" Drill stem at _____ Time 71 hr.s

Temperature of water 50° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County POLK Latitude _____ Longitude _____
Township 85 N or S Range 4W E or W. WM.
Section 33 NW 1/4 NE 1/4
Tax Lot 201 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) S. Corvallis Rd., Independence, Or.

(10) STATIC WATER LEVEL:
24 ft. below land surface. Date 01-16-07
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 35'

From	To	Estimated Flow Rate	SWL
41'	56'	500 GPM	24'

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Gravel, sand, soil fill	0'	17.5'	
Dry Brown clay	17.5'	30'	
Brown clay w/ Gravel, silt	30'	34'	
Gravel, small - large brown sand w. B.	34'	57'	24'
Blue-gray clay	57'	61'	

Date started DECEMBER 11, '06 Completed JANUARY 20, '07

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, 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 _____
Signed _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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 633
Signed Michael Waldrop Date 02-08-07

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FEB 21 2007