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APR 13 2000
WATER RESOURCES DEPT.
SALEM, OREGON

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)
Instructions for completing this report are on the last page of this form.

WELL I.D. # L 40698
START CARD # W 73877

Preston Shaw; Marinus Delint; Paul Rudd

(1) OWNER: Well Number ______
Name Shaw + De Lint - Rudd
Address XXXXXXXXXXXXXXXXXXXX 65324 Alicelln
City LaGrande State OR Zip 97850
Cove 97824

64053 Gekler Ln.

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

(3) DRILL METHOD:
☐ Rotary Air ☑ Rotary Mud ☐ Cable ☐ Auger
☐ Other Air Reverse

(4) PROPOSED USE:
☐ Domestic ☐ Community ☐ Industrial ☑ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other ______

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☑ Yes ☐ No Depth of Completed Well 3063 ft.
Explosives used ☐ Yes ☑ No Type ______ Amount ______

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
22	0	1575	cement	0	202	200 SK
			cement	1395	1513	150 SK
14 3/4	1575	3063	cement Float Shoe 1498			
3			cement Basket	1498	1513	

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:	16"	2+	680	375	☑	☐	☑	☐
	16"	680	811	312	☑	☐	☑	☐
	14"	811	1575	312	☑	☐	☑	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) ______

(7) PERFORATIONS/SCREENS:
☑ Perforations Method Manufacture 3/16 X 3
☐ Screens Type ______ Material Steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
1513	1575	3/16 X 3	2620	14	.250	☑	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Time
1000	100		1 hr.

Temperature of water 124 Depth Artesian Flow Found 300GPM
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 Union Latitude ______ Longitude ______
Township T 2 S ~~N or~~ S Range 39 E E ~~or W. WM.~~
Section 8 SE 1/4 NW 1/4
Tax Lot 3708 Lot ______ Block ______ Subdivision ______
Street Address of Well (or nearest address) 65324 Alicelln
65324 Alicel Ln, Cove, OR 97824 Cove OR. 97824

(10) STATIC WATER LEVEL:
Flowing ft. below land surface. Date ______
Artesian pressure 11 lb. per square inch. Date ______

(11) WATER BEARING ZONES:
Depth at which water was first found 12'

From	To	Estimated Flow Rate	SWL
57	62	Estimated Flow 50 gpm Total	2'
78	90		
170	174		
541	544		
598	603		

(12) WELL LOG:
Ground Elevation ______

Material	From	To	SWL
Top Soil	0	1	
Sand + clay - Tan	1	4	
Clay Tan - Hard	4	9	
Sand + clay Tan	9	21	
Clay + Sand Tan	21	34	
Clay Tan	34	57	
Sand	57	62	
Clay + Sand Brown	62	78	
Sand	78	90	
Clay Green	90	170	
Sand	170	174	
Clay + Sand	174	204	
Sandstone + Sand	204	211	
Clay Tan	211	309	
Clay Dark Green	309	407	
Clay Black - SOFT	407	418	
Clay Dark Green - SOFT	418	427	
Sand + Clay Green	427	431	
Sand + Clay Green - HARD	431	448	
Clay Tan - SOFT	448	457	

Date started 8-19-96 Completed 2-15-98

(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 1399
Signed Waldo Lowe Date 3-15-98

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SALEM, OREGON

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

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WELL I.D. # L 40698
START CARD # W73877

(1) OWNER: Well Number _____
Name _____
Address _____
City _____ State _____ 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 _____ ft.
Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 _____ Latitude _____ Longitude _____
Township _____ N or S Range _____ E or W. WM.
Section _____ 1/4 _____ 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(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
804	807	50 gpm	2'
834	839	50 gpm	2'
1540	1570	150 GPM →	Flowing
1906	1971	Can't determine	1
2119	2120	" "	1

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Clay Tan + Shale HARD	457	476	
Clay Green + Sandstone Tan	476	481	
Clay Tan + Brown - SOFT	481	538	
Clay Green Hard	538	541	
Sand Course	541	544	
Clay Gray SOFT + Sandstone Gray HARD	544	564	
Clay Tan + Brown SOFT	564	579	
Clay Tan + Brown + Sand White	579	598	
Sand course + clay	598	603	
Clay Gray SOFT	603	608	
Clay Green + Sand course	608	621	
Clay Gray SOFT	621	632	
Clay + Shale Brown	637	674	
Clay Green + Gray SOFT	674	725	
Clay Black SOFT	725	728	
Clay Gray SOFT	728	749	
Clay Gray + Sand Course	749	753	
Clay Gray SOFT	753	779	
Clay Grey-Green HARD	779	804	
Sand Course	804	807	

Date started _____ Completed _____

(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 1399
Signed Wade Lowe Date 3-5-98

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STATE OF OREGON
WATER SUPPLY WELL REPORT
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WELL I.D. # L 40698
START CARD # W73877

(1) OWNER: Well Number _____
Name _____
Address _____
City _____ State _____ 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 _____ ft.
Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 _____ Latitude _____ Longitude _____
Township _____ N or S Range _____ E or W. WM.
Section _____ 1/4 _____ 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(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
2677	2698	120 GPM 103.4	Temp
2716	2718	350 GPM Temp	107.5
2731	2738	350 GPM 106.	9
2756	2767	300 GPM	
2770	2799	100 GPM	

Flowing ↓

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Clay Green - Gray SOFT	807	834	
Sand Course	834	839	
Clay Green SOFT + HARD	839	857	
Sand + Clay Green	857	989	
Clay Green SOFT	989	1015	
Clay Green + Sand	1015	1024	
Clay Green SOFT	1024	1042	
Clay Green HARD	1042	1052	
Sand + Clay Green	1052	1061	
Clay Green SOFT	1061	1080	
Basalt Black + Pink	1080	1082	
Clay Green SOFT + Shale	1082	1089	
Basalt Brown Green Black	1089		
Shale Green		1091	
Basalt Brown + Shale Green HARD	1091	1132	
Basalt Gray HARD + Shale Green	1132	1149	
Basalt Black + Clay Green SOFT	1149	1198	
Basalt red + Gray VERY HARD	1198	1204	
Basalt Red - Clay Gray -	1204		
Shale Green		1217	

Date started _____ Completed _____

(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 1399
Signed Walt Lowe Date _____

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SALEM, OREGON

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

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WELL I.D. # L 40698
START CARD # W73877

(1) OWNER: Well Number

Name

Address

City State 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 ____ ft.

Explosives used ☐ Yes ☐ No Type ____ Amount ____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 Latitude Longitude

Township N or S Range E or W. WM.

Section 1/4 1/4

Tax Lot Lot Block Subdivision

Street Address of Well (or nearest address)

(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
2889	2897	GPM 20	Flowing
2928	2942	Can't Determine	↓
2961	2969	" "	↓
3031	3030	" "	↓
3031	3054	Temp 106.8	↓

(12) WELL LOG:

Ground Elevation

Material	From	To	SWL
Basalt Black - shale red + gray + clay Green + Brown SOFT	1217	1274	
Basalt Gray HARD - Clay Gray SOFT	1274	1441	
Basalt Gray with Brown coating + Clay	1441	1459	
Basalt Brown + Clay Gray	1459	1468	
Shale Orange HARD + Clay Gray SOFT	1468	1487	
Basalt Brown + Clay Red SOFT	1487	1504	
Shale Red + Clay	1504	1570	
Basalt Black + Shale Red	1570	1599	
Basalt Brown not very Hard	1599		
Clay Green		1631	
Basalt Gray + Black - shale Green	1631	1672	
Basalt Brown + Black - shale	1672		
Green + Gray HARD		1677	
Basalt Red + [illegible] SOFT	1677		
Shale Green + Basalt Black		1699	
Basalt Red + Green HARD +	1699		
Shale Gray + Green HARD		1719	
Basalt Brown Gray Clay Gray Green	1719	1721	

Date started Completed

(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 1399

Signed Walter Lowe Date

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SALEM, OREGON

STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 40698

START CARD # N73877

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

(1) OWNER: Well Number

Name

Address

City State 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 ____ ft.

Explosives used ☐ Yes ☐ No Type ____ Amount ____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 Latitude Longitude

Township N or S Range E or W. WM.

Section 1/4 1/4

Tax Lot Lot Block Subdivision

Street Address of Well (or nearest address)

(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
Basalt Gray + Clay Green SOFT	1721	1748	
Basalt Gray + shale Green + Clay Gray	1748	1906	
Basalt Gravel like	1906	1971	
Basalt Gray + Clay Gray	1971	1993	
Basalt Black + Clay Gray	1993	1999	
Basalt Gray VERY HARD	1999	2004	
Basalt Black + Clay Black SOFT	2004		
Shale Green		2029	
Basalt Black + Clay Gray SOFT	2029	2070	
Basalt Gray + shale	2070		
Clay Gray + Gray SOFT		2119	
Basalt Gray	2119	2120	
Basalt Black + Clay Green Gray	2120	2175	
Basalt Gray HARD + Clay Gray	2175	2222	
Basalt Black + Clay Gray + Shale Green	2222	2229	
Basalt Gray + Clay Gray + Shale Green	2229	2251	
Basalt Black + shale Green +	2251		
Clay Gray HARD		2267	
Clay Brown Gray Green Soft	2267		
+ HARD - Basalt Black		2275	

Date started Completed

(unbonded) Water Well Constructor Certification:

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WWC Number

Signed Date

(bonded) Water Well Constructor Certification:

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WWC Number 1399

Signed Date

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WELL I.D. # L 40698

START CARD # W73877

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(1) OWNER: Well Number

Name

Address

City State 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 ____ ft.

Explosives used ☐ Yes ☐ No Type ____ Amount ____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 Latitude Longitude

Township N or S Range E or W. WM.

Section 1/4 1/4

Tax Lot Lot Block Subdivision

Street Address of Well (or nearest address)

(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
Basalt Black + Brown	2276	2278	
Clay Brown Black Green	2278		
Basalt Black + Shale		2288	
Basalt Black-Clay Green + Shale Green	2288	2297	
Basalt Black-Shale Black Clay Grey	2297	2302	
Basalt Black VES.	2302	2329	
Basalt Black	2329	2336	
Basalt Black HARD	2336	2349	
Basalt Grey	2349	2353	
Basalt Green + Clay Green SOFT	2353	2355	
Shale Green HARD Clay Green	2355	2357	
Basalt Black + Clay Grey Green	2357	2359	
Basalt Grey + Clay Grey HARD	2359	2368	
Basalt Grey + Clay Grey	2368	2382	
Basalt Black + Clay Black SOFT	2382	2387	
Shale Brown Grey Green Red	2387	2390	
Basalt Black + Clay Grey	2390	2394	
Basalt Green - Shale Green	2394	[redacted]	
Clay Grey - Basalt HARD		2429	
Basalt Green + Shale Green	2429	2448	

Date started Completed

(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 1599

Signed Walter Lowe Date 3-5-98

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WATER RESOURCES DEPT.
SALEM, OREGON

UNIO. 50687

1 of #2

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

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

WELL I.D. # L 40698

START CARD # W73877

(1) OWNER: Well Number _____

Name _____

Address _____

City _____ State _____ 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 _____ ft.

Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 _____ Latitude _____ Longitude _____

Township _____ N or S Range _____ E or W. WM.

Section _____ _____ 1/4 _____ 1/4

Tax Lot _____ Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) _____

(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
Cinder Red - Shale Green -	2448		
Basalt Black		2468	
Basalt Black-shale red, Green brown	2468	2476	
Cinder Brown+Tan - shale Green	2476	2480	
Cinder Red - Shale Green	2480	2482	
Basalt Brown - Clay Brown	2482	2486	
Cinder Brown Black - shale Green Tan	2486	2503	
Basalt Black + Shale Green Hard	2503	2506	
Basalt Brown + Clay Brown	2506	2510	
Basalt Brown + Clay Brown	2510	2560	
Basalt Black+white - shale Green	2560	2569	
Basalt Brown + Black spots shale Green	2569	2581	
Basalt Brown HARD - Clay Brown	2581	2590	
Basalt Black - shale Green - Cinder	2590		
Brown + Black - Quartz - White			
red cinder VES.		2592	
Cinder Black Brown Blue Green	2592	2594	
Basalt Black - shale Green - Clay Brown	2594	2597	
Basalt Brown - Quartz White - Clay Brown	2597	2599	
Basalt Black - shale Green HARD	2599	2605	

Date started _____ Completed _____

(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 1399

Signed Walter Jones Date _____

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WATER RESOURCES DEPT.
SALEM, OREGON

Union 50687

8 of 78

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

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

WELL I.D. # L 40698

START CARD # W73877

(1) OWNER: Well Number _____

Name _____

Address _____

City _____ State _____ 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 _____ ft.

Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 _____ Latitude _____ Longitude _____

Township _____ N or S Range _____ E or W. WM.

Section _____ _____ 1/4 _____ 1/4

Tax Lot _____ Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) _____

(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
Basalt Gray - shale Green	2605	2611	
Basalt Black shale Green Quartz	2611		
GPM 25 TEMP 91.5		2618	
Basalt Gray + shale Green Quartz	2618	2627	
Basalt Black + Gray - Red Cinder	2627		
shale Green		2629	
Shale Black + Green HARD	2629	2635	
Basalt Gray + shale Green	2635	2639	
Basalt Gray - shale Green + Red	2639	2646	
Basalt Gray VES. Quartz White	2646	2648	
Shale Green - Cinder Red + Black	2648	2650	
Cinder Red + Black - Gray Green Clay	2650	2653	
Basalt Black - shale Green Red	2653	2661	
Cinder Red + Black - shale Green	2661	2663	
Basalt Black - Clay Gray	2663		
shale Green Brown Red		2667	
Basalt Gray - Clay Gray shale	2667	[illegible]	
Green		2671	
Basalt Green Clay Gray Shale Green	2671	2675	
Basalt Gray + Clay Gray	2675	2677	

Date started _____ Completed _____

(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 1599

Signed [signature] Date _____

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UNIO 50687

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APR 13 2000
WATER RESOURCES DEPT.
SALEM, OREGON

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

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

WELL I.D. # L 40698
START CARD # W73877

(1) OWNER: Well Number _____
Name _____
Address _____
City _____ State _____ 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 _____ ft.
Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 _____ Latitude _____ Longitude _____
Township _____ N or S Range _____ E or W. WM.
Section _____ 1/4 _____ 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(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
Basalt Black Loose	2677		
GPM 120 TEMP 103.4		2698	
Basalt Black	2698	2701	
Basalt Black-shale Green-Cinder Red	2701	2708	
Basalt Black-Cinder Red	2708	2712	
Basalt Grey shale Green HARD	2712		
Quartz		2716	
Basalt Black-Clay Grey-Shale Green	2716		
GPM 350 TEMP 106.6		2718	
Basalt Grey-shale Green Loose	2718	2731	
Basalt Black-Quartz white VES.	2731	2738	
Basalt Black+Quartz SOFT	2738		
GPM 35 TEMP 106.6		2740	
Basalt Black Clay Grey	2740		
Cinder Red		2747	
Basalt Grey-Clay Grey	2747	2750	
Basalt Grey Black Clay	2750	?	
Grey-Cinder Red VES		2756	
Basalt Grey-Clay Grey-shale	2756		
GPM 50 TEMP 107.5		2767	

Date started _____ Completed _____

(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 1899
Signed Walt Lowe Date _____

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WATER RESOURCES DEPT.
SALEM, OREGON

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

Union 50687

40698

(START CARD) # W73877

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

(1) OWNER: Well Number _____

Name _____

Address _____

City _____ State _____ 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 _____ ft.

Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 _____ Latitude _____ Longitude _____

Township _____ N or S Range _____ E or W. WM.

Section _____ _____ 1/4 _____ 1/4

Tax Lot _____ Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) _____

(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
Basalt Black-Shale Gray	2767	2769	
Basalt Gray With Brown Tint	2769		
Quartz white Clay LOOSE		2799	
Basalt Black+Brown Cinder	2799		
Red-Quartz White		2803	
Basalt Gray+Quartz	2803	2811	
Basalt Black VES. Quartz	2811	[redacted]	
Cinder Brown SOFT		2827	
Basalt Gray-Clay Gray	2827	2832	
Basalt Black-Clay VES.	2832	2840	
Basalt Black-Quartz White SOFT	2840	2843	
Basalt Gray-Shale Gray HARD	2843	2845	
Basalt Black-Quartz White SOFT	2845	2849	
Basalt Gray-Shale Gray	2849	2851	
Basalt Black-Shale Gray SOFT	2851	2881	
Basalt Black+Gray-Clay Gray HARD	2881	2889	
Basalt Gray+Gray-Cinder Red	2889		
GPM 20		2897	
Basalt Black+Clay Gray	2897	2907	
Basalt Gray-Quartz White	2907	2923	

Date started _____ Completed _____

(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 1599

Signed Walter Lowe Date _____

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WATER RESOURCES DEPT.
SALEM, OREGON

11 of # 12

410698

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

UNIO 50687

(START CARD) # W73877

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

(1) OWNER: Well Number

Name

Address

City State 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 ____ ft.

Explosives used ☐ Yes ☐ No Type ____ Amount ____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 Latitude Longitude

Township N or S Range E or W. WM.

Section 1/4 1/4

Tax Lot Lot Block Subdivision

Street Address of Well (or nearest address)

(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
Basalt Black - shale	2923	2925	
Cinder Black Brown Red shale	2925	2927	
Basalt Black - shale Green -	2927		
Cinder Black SOFT		2928	
Basalt Black VES. Quartz White	2928	2942	
Basalt Gray Quartz White Clay Gray	2942	2954	
Basalt Black + shale Green Quartz	2954	2957	
Basalt Gray - Clay Gray	2957	2969	
Basalt Black Quartz White	2969	2975	
Cinder Brown + Black - Quartz	2975	2977	
Basalt Black + Cinder	2977	2979	
Basalt Gray + Quartz	2979	3004	
Basalt Gray with Brown cast HARD	3004	3020	
Basalt Gray + Green Clay Gray	3020	3031	
Basalt Black VES. Cinder	3031		
Red + Brown + shale Green			
HARD		3033	
Cindered + Brown shale Green SOFT	3033	3036	
Black shale	3036	3037	
Clay Black SOFT	3037	3038	

Date started Completed

(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 1399

Signed Date

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

RECEIVED
APR 13 2000
WATER RESOURCES DEPT.
SALEM, OREGON

Unio
50687

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

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

WELL I.D. # L 40698
START CARD # N73877

(1) OWNER: Well Number ____
Name ____
Address ____
City ____ State ____ 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 ____ ft.
Explosives used ☐ Yes ☐ No Type ____ Amount ____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS:
☐ Perforations Method ____
☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing 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 ____ Latitude ____ Longitude ____
Township ____ N or S Range ____ E or W. WM.
Section ____ ____ 1/4 ____ 1/4
Tax Lot ____ Lot ____ Block ____ Subdivision ____
Street Address of Well (or nearest address) ____

(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
Basalt Black - shale +	3038		
Clay Green SOFT		3043	
Cinder Red + Brown Basalt Black	3043	3045	
Basalt Black - shale Clay Green	3045	3047	
Basalt Black - shale White	3047	3049	
Basalt Black + Gray shale Green	3049	3051	
Basalt Gray Quartz + white silicone	3051	3054	
Basalt Gray - clay Gray - Quartz	3054	3065	
Basalt Gray Clay Gray shale Green	3065		

Date started ____ Completed ____

(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 1399
Signed [signature] Date ____

3877

Flint Shaw Rudd