

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. # 23716
START CARD # 103501

(1) OWNER:

Name RICHARD MENDEL Well Number _____
Address 69697 Pumphrey Ridge Rd
City Summerville State OR Zip 97146

(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 682 ft.

Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10	0	19	Bentonite	19	12	
7 1/2	19	682				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☒ Other Bored dry

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: 6	0	19	250	☒	☐	☒	☐
Liner:				☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☒ Perforations Method Torch
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
680	670	1/8	16	6		☒	☐
670	682	3/8	16	6		☒	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing
Yield gal/min 30 Drawdown _____ Drill stem at _____ Time 1 hr.

Temperature of water 60 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 Union Latitude _____ Longitude _____
Township 1N N or S Range 39E E or W. WM.
Section 20 NE 1/4 SW 1/4
Tax Lot 307 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:

583 ft. below land surface. Date 10-24-00
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 610

From	To	Estimated Flow Rate	SWL
610	610	4	
670	682	25	

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
soil + clay	0	5	
Tan Rock	5	50	
Black Rock	50	265	
Red Soft Rock	265	280	
Black Rock	280	500	
Red + Tan Rock soft	500	524	
Black Rock	524	610	583
Red Rock soft	610	615	583
Black Rock	615	670	583
Red Rock soft	670	682	583

RECEIVED

NOV 01 2000

WATER RESOURCES DEPT
SALEM, OREGON

Date started 9-19-00 Completed 10-24-00

(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.

Signed Carl P. Fitch WWC Number 494 Date 10-24-00

(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.

Signed Carl P. Fitch WWC Number 494 Date 10-24-00

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