

DEC 16 2003

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

WATER RESOURCES DEPT
SALEM, OREGON

WELL I.D. # L 50218
START CARD # 141884

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

(1) LAND OWNER Well Number _____
Name Russel & Patricia Bingham
Address P.O. Box 509
City Talbot State Or. Zip 97841

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

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 304 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
28"	0	313'	Bentonite Cement	15'	45'	8000 #s 3500 #s

How was seal placed: Method A B C D E
 Other Overbore & Pour

Backfill placed from 130' ft. to 140' ft. Material Bentonite
Gravel placed from 140' ft. to 313' ft. Size of gravel 3"

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
16"	72'	141'	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16"	152'	180'	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16"	200'	219'	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16"	299'	304'	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____
Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method Johanson
 Screens Type Wire Pump Material M.S.

From	To	Slot size	Number	Diameter	Tele pipe size	Casing	Liner
141'	152'	.035		16"	P.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
180'	200'	.035		16"	P.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
219'	299'	.035		16"	P.	<input checked="" 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
150		120'	1 hr.

Doing a good test at later date
Temperature of water 59° 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 2 N or S Range 38 E or W. WM.
Section 27 NE 1/4 NW 1/4
Tax Lot 200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Hunter Rd.

(10) STATIC WATER LEVEL:
40 ft. below land surface. Date 12-2-03
Artesian pressure _____ lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWL
<u>all sands & Gravels below 40'</u>			

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	3	
Bin Clay	3	7	
Sand & Gravel	7	18'	
Open Clay	18'	45'	
Sand Gravel clay	45'	103'	
Coarse Sand & Gravel	103'	122'	
Blue Clay	123'	140'	
Coarse Sand clay	140'	152'	
Blue Clay	152'	180'	
Sand, Gravel, Clay sh.	180'	313'	

Date started 11-13-03 Completed 12-2-03
(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 Justin Cleaver WWC Number 1704 Date 12-2-03

(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 [Signature] WWC Number 1506 Date 12-2-03