

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

(WELL I.D.)# L 67240

(START CARD) # 153975

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

UNIO 51502

(1) OWNER: Well Number _____
Name **RAY BAYES**
Address **57891 GODLY RD.**
City **UNION** State **OR** Zip **97883**

(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 **245** ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds	
10	0	19	BENTONITE	0	19	22 SACKS	
6	16	245					

How was seal placed: Method A B C D E
 Other **POURED DRY**
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: 6	+2	239	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) **239**

(7) PERFORATIONS/SCREENS:
 Perforations Method **AIR KNIFE**
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
110	210	1X1/4	1800	6		<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

<input type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input checked="" type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
120		212	1 hr.

Temperature of water **54°** 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 **4** S Range **39** E WM.
Section **12** SW 1/4 **SE** 1/4
Tax Lot **1000** Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____
SAME

(10) STATIC WATER LEVEL:
31 ft. below land surface. Date **3-1-04**
Artesian pressure _____ lb. per square inch. Date _____

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

From	To	Estimated Flow Rate	SWL
105	210	120 GPM	31

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
SOIL	0	2	
BROWN CLAY W/ GRAVEL & COBBLES	2	12	
BROWN CLAY W/ GRAVEL	12	43	31
BROWN CLAY W/ GRAVEL & COBBLES	43	85	/
GRAVEL W/ BROWN CLAY	85	97	/
BROWN CLAY W/ GRAVEL	97	105	/
GRAVEL W/ BROWN CLAY	105	134	/
BROWN CLAY W/ GRAVEL	134	145	/
GRAVEL W/ BROWN CLAY	145	210	/
BROWN CLAY W/ GRAVEL	210	237	/
GRAVEL W/ BROWN CLAY	237	245	31

RECEIVED **RECEIVED**
MAR 11 2004 **MAR 25 2004**
WATER RESOURCES DEPT. SALEM, OREGON
WATER RESOURCES DEPT. SALEM, OREGON

Date started **2-26-04** Completed **3-1-04**

(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 _____ WWC Number _____ 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.
Signed _____ WWC Number **1775** Date **3-4-04**