

STATE OF OREGON  
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # 54983  
START CARD # 146106

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

(1) LAND OWNER City of Coue Well Number \_\_\_\_\_  
Name \_\_\_\_\_  
Address P.O. 8  
City COUE State OR. Zip 97824

(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 970  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
8"	+2	808	Cement	0	810	10 yds.

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: 8"	+2	808	.322	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 6"	945	764	.28	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) Cement shoe 808'

(7) PERFORATIONS/SCREENS:  
 Perforations Method plasma cut  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
764	945	3/16	2160	6"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
40	0		1 hr.

Flowing  Artesian

Temperature of water 51 RECEIVED  
Was a water analysis done?  Yes  No By whom \_\_\_\_\_  
Is the water not suitable for intended use?  No  Yes  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Date of test OCT 19 2009 WATER RESOURCES DEPT  
JUL 10 2009 RECEIVED  
NOV 20 2009

(9) LOCATION OF WELL by legal description:  
County Union Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 3 North Range 40 or W. WM.  
Section 22 SW 1/4 11W1/4  
Tax Lot 404 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) off Rose Ridge

(10) STATIC WATER LEVEL:  
94 ft. below land surface. Date 1-2-2009  
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
added pea gravel to 815 + cement			
Run in 8 casing .322 wall			
with cement shoe circulate			
head sent wait 72 hrs.			
Drill out head send +			
connecting shoe sand pump			
out all pea gravel			
Set 6" Casing Down			
Drilled Below Casing Drive			
Liner w/ Down Hole Drive			
Block,			

Date started May 14 Completed July 5, 2009

(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 Jody Ray WWC Number 1669  
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 Jody Ray WWC Number 1669  
Date \_\_\_\_\_