STATE OF OREGON SEP 2 5 2002 43358 WATER SUPPLY WELL REPORT
(as required by ORS 537.76 WATER RESCURCES DEPT
Instructions for completing this Tepor are on the last page of this form. WELL I.D. # L_ W146019 START CARD # (9) LOCATION OF WELL by legal description: (1) LAND OWNER Well Number ___ County MASCO ____Latitude _____ KELIN ____ Longitude _ Name JaB _N or S Range __*15 E* PU BUX 158 E or W. WM. Zip 97037 State OR S & 1/4 S & 1/4 MAUSIN (2) TYPE OF WORK Tax Lot 100 Lot ___ __Block _____Subdivision _ New Well Deepening Alteration (repair/recondition) Abandonment Street Address of Well (or nearest address) BAKLOULU 23
MADPIN VIL. 97037 (3) DRILL METHOD: (10) STATIC WATER LEVEL: 🙀 Rotary Air 🔲 Rotary Mud 🔲 Cable 🔲 Auger 192 ft. below land surface. Other_ Artesian pressure _____lb. per square inch (4) PROPOSED USE: ☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation (11) WATER BEARING ZONES: 340 Depth at which water was first found _ (5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well ft. **Estimated Flow Rate** SWL To From Explosives used Yes No Type____ 340 27 レアハ 192 36.3 SEAL HOLE Sacks or pounds Diameter From Material From 18 10 Ð 343 6 (12) WELL LOG: 1700 Method \Box A \square B Ground Elevation. How was seal placed: ROJOED Other ___ From SWL Material To Backfill placed from _____ft. to _____ft. Material O 2.5 5016 Gravel placed from ____ __ ft. to___ Size of gravel 34 ی، 2 BROWN+GACY ROCK (6) CASING/LINER: 58 CREY RUCK 34 To Gauge Steel Plastic Welded Threaded Diameter From 69 <u>58</u> BROWN ROCK 80 BROKEN GREY ROCK \Box BROWN ROCK 80 101 120 CRET RUCK 101 6254 + BROWN ROCK CINDS 25 120 138 Liner: BROKEN BROWN ROCK 138 175 Drive Shoe used ☐ Inside ☐ Outside ☐ None 243 GRET RUCK 175 Final location of shoc(s). 243 281 CRAT + BELLIN (7) PERFORATIONS/SCREENS: 281 340 CRET ROCK Method_ ☐ Perforations beown + GREY BREKEN Material ☐ Screens Type _ WITH TAN+ YELLOW CLAT Tele/pipe Slot 192 365 340 Casing Liner Number Diameter size From To size 9-10-62 Date started Completed (8) WELL TESTS: Minimum testing time is 1 hour Flowing (unbonded) Water Well Constructor Certification: 🗶 Аіг ☐ Artesian ☐ Bailer ☐ Pump I certify that the work I performed on the construction, alteration, or abandon-Drill stem at Time Yield gal/min Drawdown ment 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 100% 762.5 knowledge and belief. WWC Number Date (bonded) Water Well Constructor Certification: Temperature of water_ Depth Artesian Flow Found I accept responsibility for the construction, alteration, or abandonment work ☐ Yes By whom ______ Was a water analysis done? performed on this well during the construction dates reported above. All work ☐ Too little Did any strata contain water not suitable for intended use? 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. ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other ☐ WWC Number_ Depth of strata: _

Date