

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

APR 18 2003

WELL ID # L **L56339**

(START CARD) # **148847**

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

WATER RESOURCES DEPT.
 SALEM, OREGON

(1) OWNER: Well Number: _____
 Name **James Woods & Janet Stauffer**
 Address **81814 Dufur Valley Rd.**
 City **Dufur** State **OR** Zip **97021**

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

HOLE		SEAL		Amount	
Diameter	To	Material	From	To	sacks or pounds
12"	0	Bentonite	0	18	12 Bags
8"	18			584	

How was seal placed: Method A B C D E
 Other **Poured in 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: 8"	1.5	23.5	.250	<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) **None**

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input 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
200+		580	1 hr.

Temperature of Water **65** 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 **Wasco** Latitude **12.493** Longitude **26.342**
 Township **1S** N or S. Range **13E** E or W. of WM.
 Section **32** **NW** 1/4 **SW** 1/4
 Tax lot **2301** Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) **81814 Dufur Valley Rd., Dufur, Or.**

(10) STATIC WATER LEVEL:
200 ft. below land surface. Date **04/13/2003**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found **564**

From	To	Estimated Flow Rate	SWL
564	584	200+	200

(12) WELL LOG: Ground elevation **1679**

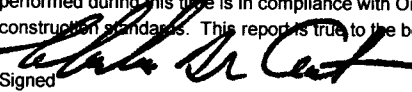
Material	From	To	SWL
Soil	0	7	
Sandstone Fine Hard Tan	7	40	
Sandstone Coarse Hard Brown	40	45	
Sandstone Fine Hard Tan	45	74	
Sandstone Fine Hard Brown	74	118	
Sandstone Fine Hard Tan	118	129	
Sandstone Coarse Hard Tan	129	134	
Sandstone Fine Hard Brown	134	210	
Sandstone Med. Hard Light Tan	210	273	
Basalt Broken Hard Brown	273	315	
Basalt Hard Gray	315	358	
Rock Decomposed Soft Brown	358	377	
Basalt Fract. Hard Black	377	462	
Basalt Fract. Hard Gray	462	516	
Rock Decomposed Soft Brown	516	523	
Basalt Fract. Med. Black	523	554	
Basalt Fract. Hard Gray	554	564	
Rock Broken Decomposed Soft Brown	564		
W/B		584	200

Date started **04/07/2003** Completed **04/13/2003**

(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 my best 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 **790**
 Date **04/16/2003**

Charles Austin