,		,
		تي
WATER	WELL REPOR	۲Ľ.

RECEIVED JUL 2 8 1981 State Well No.

5758 J

STATE OF OREGON

WATER RESOURCES DEPT SALEM, OREGON

4w - 19

(1) OWNER:	(10) LOCATION OF WELL:		
Name LALAY STACEY	- Vermaller	ell number	
Address PO BOX 7/2	<u>4 4 Section 19 T. 45</u>		
City MC Minpuille State Oregon		Subdivision	<u>W.M.</u>
(2) TYPE OF WORK (check):	Address at well location:		
New Well \mathbf{y}^{\prime} Deepening \Box Reconditioning \Box Abandon \Box			
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed	well.	
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found $Q/$		ft.
		v land surface. Date 🤈	- 8-8
Rotary Mud 🗋 Dug 🔲 Irrigation 🗍 Test Well 🗌 Other 🔲	Artesian pressure lbs.	per square inch. Date	
Cable 🗆 Bored 🗋 Thermal: Withdrawal 🗆 Reinjection 🗔	(12) WELL LOG: Diameter of well belo	w casing	
CASING INSTALLED: Steel 🖻 Plastic 🗹		of completed well	2. ý ft
CASING INSTALLED: Steel Plastic P Threaded U Welded	Formation: Describe color, texture, grain size and si thickness and nature of each stratum and aquifer per	ructure of materials;	and show
	for each change of formation. Report each change in	position of Static Wa	ter Level
	and indicate principal water-bearing strata.		
LINER INSTALLED:	MATERIAL	From To	SWL
"Diam. from ft. to ft. Gauge	50,1	0 1	
(6) PERFORATIONS: Perforated? Yes IN	Clay Brown -	1 24	
Type of perforator used	CLAY STONE	26 122	
Size of perforations in. by in.	Rock	123 124	
	-		
perforations from			
-			
ft. to	<u>-</u>		
(7) SCREENS: Well screen installed? Ves No			
Manufacturer's Name			<i>////</i>
Type Model No			
Diam			
Diam	·		
(8) WELL TESTS: Drawdown is amount water level is lowered below static level			
Was a pump test made? 🗆 Yes 😰 No If yes, by whom?		<u></u>	
d:gal/min. with ft. drawdown after hrs.		+	
	·	+	
Air test 13 gal./min. with drill stem at 110 ft. 1 hrs.			
Bailer test gal./min. with ft. drawdown after hrs.		+	
Artesian flow g.p.m.	-		<u>_</u>
perature of water Depth artesian flow encountered ft.	Work started 7-8 1981 Comple	ted 2-8	10 -
(9) CONSTRUCTION: Special standards: Yes D No	Work started 19 5 / Complete Date well drilling machine moved off of well 7	ueu / - O	19 8
Well seal—Material used $Center T Grout$		- 0	19 8
Well sealed from land surface to	Drilling Machine Operator's Certification:		
Diameter of well bore to bottom of seal	This well was constructed under my direct and information reported above are true to my	supervision. Materi	als used
Diameter of well bore below seal		Date 2-9	
	[Signed] (Drilling Machine Operator)	······ Dalt	19.5.1.
Number of sacks of cement used in well seal	Drilling Machine Operator's License No	<u>89</u>	•••••
	Water Well Contractor's Certification:		
	This well was drilled under my jurisdiction	m and this ronaut is	tmo to
Was pump installed?	the best of my knowledge and belief.	and one report is	<u>а пе</u> 10
Was a drive shoe used? Yes Yo Plugs	Nama		
Did any strata contain unusable water? \Box Yes \checkmark No		(Type or pr	int)
Type of Water? depth of strata	- Address		•••••
Method of sealing strata off	[Signed]	south.	•••••
Was well gravel packed? 🗆 Yes 🎁 No 🛛 Size of gravel:	(Water Well Contra Contractor's License No. 4.1.9. Date		. 0
Gravel placed from ft. to ft.	Contractor & License No. 4		, 19.
NOTICE TO WATER WELL CONTRACTOR	WATER RESOURCES DEPARTMENT,	SP*:	12658-690
The original and first copy of this report	SALEM, OREGON 97310		

are to be filed with the

YAMH 57 WELL IDENTIFICATION FORM	58 Owner's Weit Number: <u>3</u>
CURRENT WELL OWNER:	Phone (503) 472-2674
Name: Ben Flugstad	
Mailing Address: 2700 Sw Redmond	Hill Rd.
City: Mc Minnville State:	
WELL LOCATION: County: <u>Tombill</u> 5758 Latitude: <u>4</u>	5° 12′ Longitude: <u>123° 14′</u>
Township: _4_ N or \widehat{S} , Range: _5_ E or \widehat{S} Sec Tax Lot Number: _4524 - 1300	
Street Address of Well (if different from above):	· ·
If a well report <u>is</u> available for this well, please attach a c not necessary for you to complete the remainder of the fo well report <u>is not</u> available, please complete the remainder	orm if the well report is attached. If a
WELL INFORMATION:	
Start Card Number: Approx. Const	ruction Date: 7/8/8/
Well Constructor:	
Name of Owner at Time of Construction:	stace y
Well Depth (in feet): <u>124</u> Static Water Le	evel (in feet): <u>16</u>
Diameter of Exposed Well Casing (in inches):	6"
Does this well have a formal water right associated with it	

Application #: <u>G - 12043</u> Permit #: <u>G - 11085</u> Certificate #: ___ RECEIVED Please Return Completed Form to: **Oregon Water Resources Department** 158 12th Street NE SEP 1 8 1996 Salem, OR 97310 WATER RESOURCES DEPT. SALEM, OREGON (Office use only) 10740

Well Identification Number: _

,