

STATE OF OREGON
WATER SUPPLY WELL REPORT

(ORS 537.765 & OAR 690-205-0210)

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

YAMH 57792

WELL LABEL # L

START CARD #

ORIGINAL LOG #

(1) LANDOWNER

First Name William + Glanda Last Name Hander
Company P.O. Box 117
Address McMinnville State OR Zip 97128

(2) TYPE OF WORK

☒ New ☐ Conversion ☐ Deepening
☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a)

(2a) PRE-ALTERATION:

Well Depth _____ ft.
Seal Material _____
Casing Type: ☐ Steel ☐ Plastic ☐ Other _____
Casing Gauge _____ Casing Diameter _____

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Auger
☐ Cable ☐ Cable Mud ☐ Reverse Rotary ☐ Other _____

(4) PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection
☐ Thermal ☐ Other _____

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 70 ft. Special Standard: ☐ Yes (attach copy)

BORE HOLE

Dia	From	To	Material	From	To	Amount	Scks/lbs
12	0	85	Bentonite	0	25	345	1700

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Bentonite seal placed top run plus slurry.
Backfill placed from 50 ft. to 70 ft. Material 3/8" pvc
Filter pack from 25 ft. to 85 ft. Material 3/8" pvc

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:

Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Csg	Ln	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X	X	6"	+	2	70	1250	X		X	
		4"		10	30	1600	X	X		

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____
Temporary casing ☐ Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method Dry/Air perforated
Screens 4" pvc Material _____

Perf	Scrn	Csg	Ln	Screen Dia	From	To	Screen/Slot Width	Slot length	Tele/pipe size
	X		X	4"	30	70	.010	10"	

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian
Yield gal/min 5 Drawdown 53 Drill stem/Pump depth 85 Duration (hr) 4
Temperature 53 °F Lab analysis ☐ Yes By _____
Water quality concerns? ☐ Yes (describe below) TDS 210 ppm
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)

County Yamhill Twp 5S N or S Range 4W E or W W.M.
Sec 05 NW 1/4 of the SE 1/4 Tax Lot 5405-01001
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
Street Address of Well (or nearest address) 13450 S Hwy 99 W
McMinnville, OR 97128

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Pre-Alteration				
Completed Well	<u>7/21/2017</u>			<u>42 ft</u>

Flowing Artesian? ☐ Yes Dry Hole? ☐ Yes

WATER BEARING ZONES

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>7/27/2017</u>	<u>50</u>	<u>70</u>	<u>5</u>			<u>42</u>

(11) WELL LOG

Material	From	To
<u>Topsoil</u>	<u>0</u>	<u>2</u>
<u>Brown clay</u>	<u>2</u>	<u>18</u>
<u>Gravelly yellow clay</u>	<u>18</u>	<u>50</u>
<u>Silty clay</u>	<u>50</u>	<u>70</u>
<u>Silty clay & gravel</u>	<u>70</u>	<u>85</u>
<u>Gravelly clay</u>	<u>85</u>	<u>90</u>

RECEIVED BY OWRD

NOV 22 2017

SALEM, OR

Date Started Sept 23, 2017 Completed Sept 27, 2017

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

RECEIVED BY OWRD

License Number _____ Date _____

Signed _____ OCT 05 2017

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1765 Date 9/29/2017

Signed James J. Wiley

Contact Info. (optional) Wiley Drilling & Pump Co

P.O. Box 589

McMinnville OR 97128