

**STATE OF OREGON**  
**WATER SUPPLY WELL REPORT**

YAMH 59712

WELL I.D. LABEL# L 143515  
START CARD # 1076875  
ORIGINAL LOG #

(as required by ORS 537.545 &amp; 537.765 and OAR 690-205-0210)

5/19/2025

**(1) LAND OWNER**

Owner Well I.D. 6670

First Name RANDAL Last Name AEBI  
Company R & N AEBI FARMS LLC  
Address P.O. BOX 762  
City MCMINVILLE State OR Zip 97128

**(2) TYPE OF WORK**☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing: 

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

  
Material From To Amt sacks/lbs  
Seal: 

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**(3) DRILL METHOD**

☐ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud  
☒ Reverse Rotary ☐ Other \_\_\_\_\_

**(4) PROPOSED USE**

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

**(5) BORE HOLE CONSTRUCTION**Special Standard ☐ (Attach copy)Depth of Completed Well 113.00 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
14	0	113	Cement	0	25	25	S
					Calculated	10.9	
					Calculated		

Seal placement method: ☐ A ☐ B ☒ C ☐ D ☐ E ☐ Other:

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from 25 ft. to 113 ft. Material COLORADO SAN Size 8/16 & 1Explosives used: ☐ Type \_\_\_\_\_ Amount \_\_\_\_\_Seal Placement Begin Date 5/13/2025 Begin Time 09 00**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount

Actual Amount

**(6) CASING/LINER**

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Shoe Location
C	10	<input checked="" type="checkbox"/>	2	45	0.250	ST	<input checked="" type="checkbox"/>			
C	10		99	113	0.250	ST	<input checked="" type="checkbox"/>			

Temp casing ☒ Yes Dia 14 From+ ☐ 0 To 113**(7) PERFORATIONS/SCREENS**

Perforations Method \_\_\_\_\_

Screens Type Wrap ribMaterial Stainless steel

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
Screen	Casing	10	45	65	.016			Pipe Size
Screen	Casing	10	65	99	.03			Pipe Size

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	55		84	2

Temperature 58 °F Lab analysis ☐ Yes By \_\_\_\_\_Water quality concerns? ☐ Yes (describe below) TDS amount 153 ppm

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**County YAMHILL Twp 4.00 S N/S Range 4.00 W E/W WMSec 11 NW 1/4 of the NW 1/4 Tax Lot 500

Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ " or 45.24290200 DMS or DD

Long \_\_\_\_\_ " or -123.15493300 DMS or DD

☐ Street address of well ☒ Nearest addressN. LONEOAK RD. - MCMINVILLE, OR**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	5/14/2025			15
Flowing Artesian?	<input type="checkbox"/>			
Dry Hole?	<input type="checkbox"/>			

**WATER BEARING ZONES**Depth water was first found 45.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
5/14/2025	45	101	55			15

**(11) WELL LOG**Ground Elevation 155.67 FT

Material	From	To
Gravel fill	0	0.5
Brown clay	0.5	21
Blue sandy clay	21	48
Black sand w/some wood	48	58
Coarse black sand	58	75
Blue clay	75	78
Grits	78	88
Blue clay	88	97
Grits	97	101
Blue clay	101	113

Construction

Begin Date 4/24/2025 Begin Time 08 18 End Date 5/14/2025**(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.

License Number 1411 Date 5/19/2025Signed KURT MARTIN (E-filed)**(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 1684 Date 5/19/2025Signed BRET JONES (E-filed)Drilling Company: JONES DRILLING CO., INC.

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

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WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

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**5/19/2025**

## Map of Hole

