

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

03-09-2011

WELL LABEL # L 105779

START CARD # 1012581

(1) LAND OWNER Owner Well I.D. _____

First Name Jason Last Name Churchill
Company _____
Address 2156 Luth St.
City Roseburg State OR Zip 97471

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(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 103.00 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
10	0	58	Cement	0	58	24	S
6	58	103					

How was seal placed: Method A B C D E

Other _____

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	2	58	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perf/S	Casing/	Screen	From	To	Scrn/slot	Slot	# of	Tele/
creen	Liner	Dia	From	To	width	length	slots	pipe size

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

<input type="radio"/> Pump	<input type="radio"/> Bailer	<input checked="" type="radio"/> Air	<input type="radio"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
35		103	1

Temperature 57 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Lane Twp 15.00 S N/S Range 1.00 W E/W WM
Sec 23 NW 1/4 of the SW 1/4 Tax Lot 516
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address

Theftord Lane, Left of Mohawk River Rd., MP 1. 1/8 miles then left through gate to end. Marcola, OR

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	<u>03-08-2011</u>		<u>44</u>

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 82

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
<u>03-08-2011</u>	<u>82</u>	<u>103</u>	<u>35</u>		<u>44</u>

(11) WELL LOG

Material	From	To	Ground Elevation
brown clay	0	30	
blue sandstone	30	103	
RECEIVED MAR 15 2011 WATER RESOURCES DEPT SALEM, OREGON			

Date Started 03-07-2011 Completed 03-08-2011

(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 1839 Date 03-09-2011

Electronically Filed

Signed MICHAEL J HOLLEY (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 1541 Date 03-09-2011

Electronically Filed

Signed CASEY JONES JR (E-filed)

Contact Info (optional) Casey Jones Well Drilling Co. Inc. 541-747-2806