

MAINLINE PUMP & IRRIGATION LLC

815 Applegate Street
Telephone: 541-929-3870

PO BOX 869
FAX: 541-929-3852

NAME: DIANA BRYNE

ADDRESS: 29759 BELLFOUNTAIN RD
CORVALLIS OREGON

DATE: JUNE 5,2015

* PLEASE NOTE: This four (4) hour flow test was taken with trained personnel on site, monitoring and measuring the water flow every 30 minutes. This test may reflect what the pump produces and not necessarily the capacity of the well.

* We highly suggest an annual purity test.

Air vent: YES
Pressure relief valve: YES
Filtration: NO
Shared Well: NO
Smelly Water: NO

WELL HEAD ABOVE GROUND
WELL TAG #NONE
WELL HEAD SANI TARY

Pump: JACUZZI SUBMERSIBLE 3HP

TIME	GPM
9:15	47
9:45	47
10:15	47
10:45	47
11:15	47
11:45	47
12:15	47
12:45	47
1:15	47

FLOW WAS RESTRICTED BY TESTING
PIPE
THIS IS A 60 GALLON PER MINUTE WELL

THE PUMP CAN PRODUCE 60 GPM

Thank You for Allowing Us to Serve You,

Shirley Cole

Mainline Pump & Irrigation LLC

MAINLINE PUMP & IRRIGATION LLC

815 Applegate Street
Telephone: 541-929-3870

PO BOX 869
FAX: 541-929-3852

NAME: DIANA BYRNE

Date: APRIL 2015

ADDRESS: 29759 BELLFOUNTAIN RD CORVALLIS

270 TDS (total dissolved solids) 500ppm is EPA suggested maximum
Contaminant level

7.5 PH - 7 is Neutral - over 7 is alkaline - 6.8 or under is corrosive

.6 IRON - Over 0.3 ppm stains plumbing and fixtures

7 HARDNESS - 3.50 gpg forms scales, clogs water heaters and pipes

75 SALT - Over 250 ppm affects the taste of the water

0 MANGANESE - Discolored (brownish-red) water, odor & taste

0 SILICA

0 SULPHUR

Recommend: Iron Removal unit followed by a Water Softener



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for Well ID Number

RECEIVED

MAY 13 2015

Do not complete if the well already has a Well Identification Number.

WATER RESOURCES DEPT
SALEM, OREGON

I. OWNER INFORMATION

Current Owner Name (please print): Jane L. Byrne Trust

Mailing Address: 380 NW Hermosa Blvd

City, State, Zip: Portland, Or

Mail Well ID Tag to: ☐ SAME AS ABOVE ☒ In Care Of (C/O)

Name & Address: Diana Byrne

City, State, Zip: 380 NW Hermosa Blvd., Portland, Oregon 97210

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 13S (North / South) Range: 5W (East / West) Section: 18

Tax Lot: 135 180 0000 (100) County Benton 1/4 1/4

GPS Coordinates: about 44.4472732N, 123.334702W

Street Address of Well, City: 29759 Bellfountain Rd., Corvallis, Oregon 97333

If the property had a different street address in the past: 29789 Bellfountain Rd., Corvallis, Oregon 97333

III. GENERAL WELL INFORMATION (Please fill out as completely as possible)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Domestic and irrigation. Well log # Bent 6291

Date Well Constructed (or property built): 1966 Total Well Depth: 50 feet Casing Diameter: 8"

Owner at time the well was constructed (if known): "Lewis Earls" is recorded on well log; surname might be "Earlles", actually

Other Information: Well log #: Bent 6291

SUBMITTED BY (please print): Alan Woods

PHONE: (503) 9703359 EMAIL &/or FAX: alan_woods@comcast.net

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department

Received Date:

5-13-15

Well Log Number:

BENT 6291

Well Identification #:

L-118433

629

SEP 21 1966 WATER WELL REPORT

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion. SALEM, OREGON

State Well No. 1356-1

State Permit No. _____

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☒ No If yes, by whom?

Yield:	gal./min. with	ft. drawdown after	hrs
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Bailer test 60 gal./min. with 18 ft. drawdown after 1 hrs

County Benton Driller's well number _____

1/4 1/4 Section 17 T. 13^s R. 5^w W.M.

Artesian flow	g.p.m.	Date
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Bearing and distance from section or subdivision corner

Temperature of water Was a chemical analysis made? ☐ Yes ☒ No

(12) WELL LOG: Diameter of well below casing 8

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐
If abandonment, describe material and procedure in Item 12.

Depth drilled 50 ft. Depth of completed well 50 ft.

(5) TYPE OF WELL:

Domestic ☒ Industrial ☐ Municipal ☐ Rotary ☐ Driven ☐
Irrigation ☐ Test Well ☐ Other ☐ Cable ☒ Jetted ☐

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

(6) CASING INSTALLED:

(6) CASING INSTALLED: Threaded ☐ Welded ☒
 8" Diam. from 0 ft. to 46 ft. Gage 250
 " Diam. from ft. to ft. Gage
 " Diam. from ft. to ft. Gage

(7) PERFORATIONS:

Perforated? ☒ Yes ☐ No

Type of perforator used CAS TURCH

Size of perforations	in.	by	in.
4 Rows 4 7/8" Row	38	ft. to	45
perforations from		ft. to	
perforations from		ft. to	
perforations from		ft. to	
perforations from		ft. to	
perforations from		ft. to	

(8) SCREENS:

Well screen installed? ☐ Yes ☒ No

Manufacturer's Name _____

Model No. _____

Slot size _____ Set from _____ ft. to _____ ft.

Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:

Well seal—Material used in seal BENTONITE
Depth of seal 18 ft. Was a packer used? NO
Diameter of well bore to bottom of seal 11 in.
Were any loose strata cemented off? ☐ Yes ☒ No Depth _____
Was a drive shoe used? ☐ Yes ☒ No
Was well gravel packed? ☐ Yes ☒ No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.
Did any strata contain unusable water? ☐ Yes ☐ No
Type of water? _____ depth of strata _____
Method of sealing strata off _____

(10) WATER LEVELS:

Static level 13 ft. below land surface Date Sept. 66
Artesian pressure _____ lbs. per square inch Date _____

(13) PUMP:

Manufacturer's Name _____

Type: _____ H.P. _____

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Houder Well Drilling
(Person, firm or corporation) (Type or print)

Address RF 2 CORVALLIS ORE

Drilling Machine Operator's License No. 79

[Signed] Bill Howell
(Water Well Contractor)

Contractor's License No. 56 Date Sept. 1946

(USE ADDITIONAL SHEETS IF NECESSARY)