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STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

FEB 28 2002

WELL I.D. # L 50910
START CARD # 147222

Instructions for completing this report are WATCH THE INSTRUCTIONS on the back of this form. SALEM, OREGON

(1) LAND OWNER
Name Terry Moore
Address 9491 NW 12th
City Terrebonne State OR Zip 97760

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

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 340 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
		ALL READY GROUTED			
	6	180	340		

How was seal placed: Method A B C D E
 Other

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Casing/Liner	Diameter	From	To	Gauge	Steel				Threaded
					Plastic	Welded	Other	Other	
Casing	6	72	60	1.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner	5.75	-15	335	1.88	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method Machined
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
295	335	1/2 x 1/4	456	5.12		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
25+	0	335	1 hr

Temperature of water 56 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Deschutes Latitude _____ Longitude _____
Township 14 N or S Range 13 E or W. WM.
Section 16 NE 1/4 NW 1/4
Tax Lot 106 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 12th St, Terrebonne, OR

(10) STATIC WATER LEVEL:
170 ft. below land surface. Date 2-22-02
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 170

From	To	Estimated Flow Rate	SWL
312	340	25+	170

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Broken Lava	180	193	170
Basalt	193	312	
W.B. Brown Sand-Stone	312	340	

Date started 2-02-02 Completed 2-22-02

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, 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.
Signed [Signature] WWC Number 1276 Date 2-22-02

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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.
Signed Doug Fisher WWC Number 1255 Date 2-22-02

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JAN 06 2011