



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 BY OWRD
MAY 4 2013

RECEIVED SALEM, OR

MAR 14 2011

WATER RESOURCES DEPT
SALEM, OREGON

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

I. OWNER INFORMATION

Current Owner Name (please print): High Desert Estates Homeowners

Mailing Address: 4488 SE Jerry Dr

City: Prineville

State: OR

Zip: 97754

Mailing Address (to send Well I.D.): 4488 SE Jerry Dr

City: Prineville

State: OR

Zip: 97754

II. WELL INFORMATION (Do not complete this section if the well report is attached.)

Township: 15 South

(North/South) Range: 16 East

(East/West) Section: 21 B

Tax Lot: 800

County: Crook

SE

1/4 SW

1/4

Street Address of Well: 4488 SE Jerry Dr

City: Prineville

Owner at time the well was constructed, (if known): Janet Walker

If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Community well

Date Well Constructed: 7/31/1990

Total Well Depth: 300 Ft

Casing Diameter: 8"

Other Information: This well serves Certificate 85101

SUBMITTED BY (please print): Jeremy Giffin (District 11 Watermaster)

PHONE: (541) 388-6669

FAX: (541) 388-5101

GPS Location - 44.26175 N -120.81885 W

Send application to Oregon Water Resources Department; 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.

For Official Use Only by the Oregon Water Resources Department:
Received Date:
Well Log Number: Crooks 029
Well Identification #: L-94626

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

**CROOK CROOK 29**  
**029**

**L-94626**

**15S/16E/21**

WATER RESOURCES DEPARTMENT (START CARD) # **21305**

**(1) OWNER:** Well Number: **547**

Name **JANET WALKER**  
 Address **2944 NE 36th AVE**  
 City **PORTLAND** State **ORE** Zip **97212**

**(2) TYPE OF WORK:**  
 New Well  Deepen  Recondition  Abandon

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  
 Other \_\_\_\_\_

**(4) PROPOSED USE:**  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION:**  
 Special Construction approval Yes No   Depth of Completed Well **300** ft.  
 Explosives used   Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	25	CEMENT	0	25	15
8"	25	300				

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 \_\_\_\_\_

**(6) CASING/LINER:**

Casing/Liner	Diameter	From	To	Gauge	Steel		Plastic		Welded	Threaded
					Steel	Plastic	Welded	Threaded		
Casing:	8"	+1	25	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

**(7) PERFORATIONS/SCREENS:**

Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min **60 gpm** Drawdown **UNKNOWN** Drill stem at **300** Time **1 hr.**

Temperature of water \_\_\_\_\_ 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 **CROOK** Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township **15S** N or S, Range **16E** E or W, WM.  
 Section **21** 4 \_\_\_\_\_ 4 \_\_\_\_\_  
 Tax Lot **806** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) \_\_\_\_\_

**(10) STATIC WATER LEVEL:**

**129** ft. below land surface. Date **7-31-90**  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**

Depth at which water was first found **129**

From	To	Estimated Flow Rate	SWL
129	300	60	129

**(12) WELL LOG:** Ground elevation \_\_\_\_\_

Material	From	To	SWL
SANDY Top Soil	0	1	
CEMENTED GRAVEL	1	16	
BROWN CLAYSTONE	16	79	
GREEN CLAYSTONE	79	108	
BROWN CLAYSTONE	108	129	
GRAVEL	129	138	
BROWN SANDSTONE	138	160	
YELLOW ROCK	160	192	
HARD GREEN ROCK	192	204	
YELLOW CLAYSTONE	204	239	
GREY ROCK	239	300	

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JUN 24 2013

SALEM, OR

Date started **7-30-90** Completed **7-31-90**

**(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

WWC Number \_\_\_\_\_  
 Signed \_\_\_\_\_ Date \_\_\_\_\_

**(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 well construction standards. This report is true to the best of my knowledge and belief.

WWC Number **584**  
 Signed **Samuel M. [Signature]** Date **7-31-90**

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155/154/21 CC  
54377 (L-3200)

STATE OF OREGON  
WATER WELL REPORT  
(as required by ORS 837.785)

CR00  
319

OCT 17 1991

(START CARD)

(1) OWNER:  
Name Mark Fleming  
Address 36596 Cedar Hills Ln.  
City Pleasant Hill State Oreg Zip 97455

Well Number: WATER RESOURCES DEPT

(9) LOCATION OF WELL by legal description:  
TOWNSHIP 15 RANGE 15 SECTION 21  
Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 15 Range 15 Section 21  
Tax Lot 807 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

(2) TYPE OF WORK:  
 New Well  Deepen  Recondition  Abandon

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  
 Other \_\_\_\_\_

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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval Yes  No  Depth of Completed Well 400 ft.  
Explosives used Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE SEAL Amount  
Diameter From To Material From To sacks or pounds  
12 0 30 Cement 0 30 16  
8 30 400 \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

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 \_\_\_\_\_

(6) CASING/LINER:

Casing	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	<u>8</u>	<u>15</u>	<u>30</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Liner:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of abstract \_\_\_\_\_

(7) PERFORATIONS/SCREENS:  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 30 Drawdown Comp. Drill stem at 400 Time 1 hr.

Temperature of water 53 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: \_\_\_\_\_

(10) STATIC WATER LEVEL:  
276 ft. below land surface. Date 8-14-91  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 276

From	To	Estimated Flow Rate	SWL
<u>276</u>	<u>278</u>	<u>6</u>	<u>276</u>
<u>310</u>	<u>320</u>	<u>24</u>	<u>226</u>

(12) WELL LOG: \_\_\_\_\_ Ground elevation \_\_\_\_\_

Material	From	To	SWL
<u>Top Soil</u>	<u>0</u>	<u>1</u>	
<u>Barkels and Sand</u>	<u>1</u>	<u>4</u>	
<u>Expanded Foam</u>	<u>4</u>	<u>61</u>	
<u>Sand Stone BROWN</u>	<u>61</u>	<u>162</u>	
<u>Blue Clay</u>	<u>162</u>	<u>184</u>	
<u>Brown Sand Stone</u>	<u>184</u>	<u>204</u>	<u>276</u>
<u>Brown Lava</u>	<u>204</u>	<u>321</u>	<u>276</u>
<u>Blue Clay Stone</u>	<u>321</u>	<u>328</u>	
<u>Blue Sand Stone</u>	<u>328</u>	<u>400</u>	

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JUN 24 2013

SALEM, OR

Date started 8-9-91 Completed 8-14-91

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed Danah M. Mofit WWC Number \_\_\_\_\_ Date \_\_\_\_\_

(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 well construction standards. This report is true to the best of my knowledge and belief.

Signed Danah M. Mofit WWC Number \_\_\_\_\_ Date 8-16-91

1011621

on tax roll 9/0 Mark Fleming 1995  
 11-15-16-98-00-807  
 STATE OF OREGON  
**WATER WELL REPORT**  
 (as required by ORS 537.765)

Amended  
 Well Report  
 (START CARD) 1 34377  
 L-32000  
 155/15E/21CC

(1) OWNER: Well Number: \_\_\_\_\_  
 Name Mark Fleming  
 Address 36596 Cedar Hills Ln.  
 City Heasent Hill State Oreg Zip 97485

(2) TYPE OF WORK:  
 New Well  Deepen  Recondition  Abandon

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  
 Other \_\_\_\_\_

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

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval Yes  No  Depth of Completed Well 400 ft.  
 Explosives used  Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12	0	30	Gravel	0	30	16
8	30	400				

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 \_\_\_\_\_

(6) CASING/LINER:

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing	8	12	30	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of sheets: \_\_\_\_\_

(7) PERFORATIONS/SCREENS:  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min 30 Drawdown Comp. Drill stem at 400 Time 1 hr.

Temperature of water 53 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 Clack Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 15 North Range 16 East W. W.M.  
 Section 21 SW  $\frac{1}{4}$  SW  $\frac{1}{4}$   
 Tax Lot 807 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:  
276 ft. below land surface. Date 8-14-91  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 276

From	To	Estimated Flow Rate	SWL
276	278	6	276
310	520	24	276

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
Top Soil	0	1	
Bankers and Sand	1	4	
Consolidated Zone	4	61	
Sand Stone BROWN	61	162	
Brown Clay	162	184	
Brown Sand Stone	184	204	276
Brown Lava	204	321	276
Brown Clay Stone	321	328	
Brown Sand Stone	328	400	

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NOV - 7 1995 JUN 24 2013

WATER RESOURCES DEPT. SALEM, OR  
 SALEM, OREGON

Date started 8-9-91 Completed 8-14-91

(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 well constructor standards. Materials used and information reported above are true to my best knowledge and belief.  
 Signed Danell P. Pappert WWC Number \_\_\_\_\_ Date \_\_\_\_\_

(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 well constructor standards. This report is true to the best of my knowledge and belief.  
 Signed Danell P. Pappert WWC Number \_\_\_\_\_ Date 8-16-91

Rec'd 10-29-91 WWD#11

1011621

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CRDO  
51134

SEP 24 1999

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

WATER RESOURCES DEPT.  
SALEM, OREGON

WELL I.D. # 32000

START CARD # 103936

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

(1) OWNER:

Well Number 588  
Name Mark Fleming  
Address 2211 SE Morning Side  
City Dunnville State Oreg. Zip 97134

(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       ft.  
Explosives used  Yes  No Type       Amount      

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	

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      

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>6</u>	<u>-10</u>	<u>400</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations Method Fisher  
 Screens Type       Material      

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>278</u>	<u>400</u>	<u>3x8</u>	<u>1440</u>			<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Bailor	<input type="checkbox"/> Air	<input type="checkbox"/> Artesian
Yield gal/min	Drawdown	Drift stem at	Time
<u>5</u>	<u>NO</u>		<u>1 hr.</u>

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 Clatsop Latitude       Longitude        
Township 15 N or (S) Range 16 E or W. WM.  
Section 21 SW 1/4 SW 1/4  
Tax Lot 807 Lot       Block       Subdivision        
Street Address of Well (or nearest address)      

(10) STATIC WATER LEVEL:

276 ft. below land surface. Date 9-1-99  
Artesian pressure       lb. per square inch. Date      

(11) WATER BEARING ZONES:

Depth at which water was first found      

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground Elevation      

Material	From	To	SWL

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JAN 06 2000

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WATER RESOURCES DEPT.  
SALEM, OREGON

JUN 24 2013

SALEM, OR

Date started 8-4-99 Completed 9-1-99

(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.

WWC Number      

Signed      

Date      

(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.

WWC Number 584

Signed Donald M. [Signature]

Date 9-20-99

JAN 10 1997

WELL I.D.# LO1460

STATE OF OREGON WATER RESOURCES DEPT. WATER SUPPLY WELL REPORT SALEM, OREGON

CROOK  
50209

(START CARD) # 82899

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

(1) OWNER: Well Number 802  
Name Mark Flemming  
Address 2211 SE Morning side  
City Prineville State OR Zip 97754

(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 600 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
12"	0	1 1/2" Bentonite	0	1 1/2"	19
8"	1 1/2"				600

How was seal placed: Method  A  B  C  D  E  
 Other poured in dry  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8"	1 1/2" 18 1/2"	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 30 Drawdown unknown Drill stem at 600 Time 1 hr.  
Temperature of water 58° 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 Crook Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 15 N or S Range 16 E or W. W.M.  
Section 21 SW 1/4 SW 1/4  
Tax Lot 807 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) South Jerry Drive

(10) STATIC WATER LEVEL:  
240 ft. below land surface. Date 9/5/96  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 370

From	To	Estimated Flow Rate	SWL
<u>370</u>	<u>600</u>	<u>30</u>	<u>240</u>

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
TOP SOIL	0	2	
Hard Black Basalt	2	51	
Hard Brown Clay Stone	51	68	
Hard Brown Clay Stone w/ SOFT	68	78	
Rock Seams Black			
Hard Brown Clay Stone	78	184	
Hard Brown Clay Stone w/ SOFT	184	270	240
Black Rock Seams			
Hard Black Basalt w/ SOFT Brown Rock	270	298	
Hard Black Basalt w/ Hard Brown Clay	298	372	
Stone			
Hard Brownish Green Clay Stone	372	425	
Hard Brown Sand Stone	425	478	
Hard Dark Green Clay Stone	478	580	
Hard Dark Green Clay Stone w/ SOFT	580	600	
SOFT Brown Rock Seams			

Date started 9/4/96 Complete 9/5/96  
(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 David M. Hollister WWC Number 1583 Date 9/5/96

(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 Danny M. Maffett WWC Number 584 Date 10-1-96

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CROO  
51131

SEP 24 1999

STATE OF OREGON  
WATER SUPPLY WELL WATER RESOURCES DEPT.  
(as required by ORS 537.765) SALEM, OREGON

WELL I.D. # L 0 1460  
START CARD # 103927

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

(1) OWNER:

Well Number 802

Name Mark Fleming  
Address 2211 SE Merain, Side  
City Rainier State OR Zip 97254

(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 \_\_\_\_\_ ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

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 \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>6</u>	<u>-10</u>	<u>470</u>	<u>185</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method Fuzury  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tube/pipe size	Casing	Liner
<u>200</u>	<u>440</u>	<u>3x4</u>	<u>280</u>			<input type="checkbox"/>	<input checked="" type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Bailer Drawdown	Air Drill stem at	Flowing Artesian Time
<u>5</u>	<u>No</u>		<u>1 hr.</u>

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 CROOK Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 15 N or S Range 16 or W. WM.  
Section 21 SW 1/4 SA 1/4  
Tax Lot 807 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Sewell Ferry Drive

(10) STATIC WATER LEVEL:

240 ft. below land surface. Date 7-2-99  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL

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JUN 24 2013

SALEM, OR

Date started 6-3-99 Completed 7-2-99

(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.

WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

(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.

WWC Number \_\_\_\_\_  
Signed David M. [Signature] Date 9-20-99



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

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MAR 14 2011

WATER RESOURCES DEPT
SALEM, OREGON

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

I. OWNER INFORMATION

Current Owner Name (please print): Mark W Fleming & Jaunita M Fleming

Mailing Address: 4777 NW Lamonta Rd

City: Prineville

State: OR

Zip: 97754

Mailing Address (to send Well I.D.): 4777 NW Lamonta Rd

City: Prineville

State: OR

Zip: 97754

II. WELL INFORMATION (Do not complete this section if the well report is attached.)

Township: 15 South (North/South) Range: 16 East (East/West) Section: 21 1/4

Tax Lot: 1600 County: Crook SW 1/4 SE 1/4

Street Address of Well: 5980 SE Jerry Dr City: Prineville

Owner at time the well was constructed, (if known): Mark Flemming

If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Community well

Date Well Constructed: 5/17/1995 Total Well Depth: 420 Ft Casing Diameter: 8"

Other Information: This well serves Certificate 85101 & Permit G-13439.

SUBMITTED BY (please print): Jeremy Giffin (District 11 Watermaster)

PHONE: (541) 388-6669

FAX: (541) 388-5101

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JUN 24 2013

GPS Location - 44.24746 N -120.81435 W

SALEM, OR

Send application to Oregon Water Resources Department; 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

Well Log Number:

Well Identification #:

Crook 3232

L-94625



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

**CROO**  
**3232**

**CROO 3232**

**L-94625**

155116E121

(START CARD) # **71873**

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

(1) OWNER: Well Number **742**  
Name **Maris Flemming**  
Address **6072 S Davis Loop**  
City **Philippi** State **OR** Zip **97159**

(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 **420ft.**  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
12	0	28 1/2	Benimite	0	20	9	
8	28 1/2	420	Zenith	20	28 1/2	12	

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 \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8	1/2	18 1/2	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Tele/pipe size	Casting	Liner
							<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
23	4.2	420	1 hr.

Pump  Bailer  Air  Flowing  Artesian

Temperature of water **68** 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 **Clatsop** Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township **15** N or (S) Range **16** (E) or W. WM.  
Section **21** 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
Tax Lot **907** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) **Janiper Canyon Rd.**

(10) STATIC WATER LEVEL:  
**187** ft. below land surface. Date **5-18-95**  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found **220**

From	To	Estimated Flow Rate	SWL
220	420	23	187

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Sandy Top Soil	0	2	
Broken Rock Sand Stone	2	16	
Brown Sand Stone	16	202	
Broken Rock	202	218	
Brown Sand Stone	218	351	
Brown Clay	351	396	
Blue gray clay	396	420	

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**RECEIVED**

JUN 24 2013

AUG 23 1995

SALEM, OR WATER RESOURCES DEPT.  
SALEM, OREGON

Date started **5-16-95** Completed **5-17-95**

(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.  
WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

(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.  
WWC Number **584**  
Signed **Daniel Maffei** Date **5-20-95**

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

07-21-2010

WELL LABEL # L 101170

START CARD # 1010630

(1) LAND OWNER
Owner Well I.D.
First Name DORTHY Last Name WILLS
Company HIGH DESERT WATER DISTRICT
Address 4488 SE JERRY DR
City PRINEVILLE State OR Zip 97754

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

(3) DRILL METHOD
Rotary Air [x] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud [ ]
Reverse Rotary [ ] Other [ ]

(4) PROPOSED USE
Domestic [x] Irrigation [ ] Community [ ]
Industrial/Commercial [ ] Livestock [ ] Dewatering [ ]
Thermal [ ] Injection [ ] Other [ ]

(5) BORE HOLE CONSTRUCTION
Special Standard [ ] (Attach copy)
Depth of Completed Well 611.00 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, sacks/lbs

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E [ ]
Other Did Not Disturb [x]
Backfill placed from \_\_\_ ft. to \_\_\_ ft. Material \_\_\_
Filter pack from \_\_\_ ft. to \_\_\_ ft. Material \_\_\_ Size \_\_\_
Explosives used: [ ] Yes Type \_\_\_ Amount \_\_\_

(6) CASING/LINER
Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd

Shoe [ ] Inside [ ] Outside [ ] Other [ ] Location of shoe(s) \_\_\_
Temp casing [ ] Yes Dia \_\_\_ From \_\_\_ To \_\_\_

(7) PERFORATIONS/SCREENS
Perforations Method Machine
Screens Type \_\_\_ Material \_\_\_
Table with columns: Perf/S, Casing/Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump [ ] Bailer [ ] Air [x] Flowing Artesian [ ]
Yield gal/min 12 Drawdown 611 Drill stem/Pump depth 1 Duration (hr) 1

Temperature 72 °F Lab analysis [ ] Yes By \_\_\_
Water quality concerns? [ ] Yes (describe below)
Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)
County Crook Twp 15.00 S N/S Range 16.00 E E/W WM
Sec 21 SW 1/4 of the SW 1/4 Tax Lot 807
Tax Map Number \_\_\_ Lot \_\_\_
Lat 44° 14' 50.000" or 440.2472222 DMS or DD
Long -120° 48' 48.000" or -120.8133333 DMS or DD
Street address of well [ ] Nearest address [x]

MP 3 JUNIPER CANYON RD

(10) STATIC WATER LEVEL
Table with columns: Date, SWL(psi), SWL(ft)
Existing Well / Predeepening 07-15-2010 200
Completed Well 07-19-2010 143
Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES
Depth water was first found 350
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft)

(11) WELL LOG
Ground Elevation 3,480
Table with columns: Material, From, To
Cave In Siltstone Broken Brown 350 365
Siltstone Brown 365 390
Siltstone Gray 390 570
Siltstone Gray Fractured Layers 570 611

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JUN 24 2013
SALEM, OR

Date Started 07-15-2010 Completed 07-16-2010

(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 1831 Date 07-21-2010
Electronically Filed
Signed ALLEN R PECK (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 1720 Date 07-21-2010
Electronically Filed
Signed JACK ABBAS (E-filed)
Contact Info (optional)