

NOTICE TO WATER WELL CONTRACTOR:

The original and first copy of this report are to be filed with the

RECEIVED
MAY 7 1968
STATE ENGINEER
SALEM, OREGON

WATER WELL REPORT

STATE OF OREGON

(Please type or print)
(Do not write above this line)

State Well No. 38/7-17 R

State Permit No. _____

Lake 1946

(1) OWNER:

Name Clarence Dallas-Drew Valley Ranch
Address Lakeview Oregon

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 13.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
Diam. from 0 ft. to 95 ft. Gage 1
Diam. from _____ ft. to _____ ft. Gage _____
Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Perforated? Yes No.
Type of perforator used torch
Size of perforations 1/4 in. by 10 in.
30 perforations from 95 ft. to 75 ft.
20 perforations from 45 ft. to 30 ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name _____ Model No. _____
Type _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WATER LEVEL: Completed well.

Static level 3 ft. below land surface Date 4/5/68
Artesian pressure _____ lbs. per square inch Date _____

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?
_____ gal./min. with _____ ft. drawdown after _____ hrs.
_____ gal./min. with _____ ft. drawdown after _____ hrs.
_____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water 56 Was a chemical analysis made? Yes No

(10) CONSTRUCTION:

Well seal—Material used Bentonite
Depth of seal 25 ft.
Diameter of well bore to bottom of seal 20 in.
Were any loose strata cemented off? Yes No Depth _____
Was a drive shoe used? Yes No
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(11) LOCATION OF WELL:

County Lake Driller's well number 11
SE 1/4 SE 1/4 Section 17 T. 38 R. 17 W.M.

Bearing and distance from section or subdivision corner

(12) WELL LOG: 14" to 125'--10" to 225'

Diameter of well below casing _____
Depth drilled 225 ft. Depth of completed well 225 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level as drilling proceeds. Note drilling rates.

MATERIAL	From	To	SWL
Clay, gravel brown	0	31	58 5
Sandstone, brown carrying water	31	38	
Gravel, sand	38	72	5
Sandstone, yellow	72	87	
Black/glass/	87	132	
Black glass	87	132	5
Gray basalt	132	220	
Gravel small carrying some water	220	222	
Gray basalt	222	225	3

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DEC 18 2013
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SALEM, OREGON
MAY 19 2014
WATER RESOURCES DEPT
SALEM, OREGON

Work started 1/19/68 19 Completed 4/5/68 19
Date well drilling machine moved off of well 4/5/68 19

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Denny McClane Date 4/29 1968
(Drilling Machine Operator)

Drilling Machine Operator's License No. 107

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 Denny M. McClane Well Drilling
(Person, firm or corporation) (Type or print)

Address 1607 Austin

[Signed] Denny McClane
(Water Well Contractor)

Contractor's License No. 476 Date 4/29 1968

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

08-18-2008

WELL LABEL # L 92038

START CARD # 1001929

(1) LAND OWNER Owner Well I.D. _____
 First Name JACK Last Name SPARROWK
 Company _____
 Address 16684 HWY 140E
 City LAKEVIEW State OR Zip 97630

(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 664.00 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
14	131	201					
10	216	664					

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 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"/>

Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia _____ From _____ To _____

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

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

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
500	135	147	4

Temperature 59 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
 County Lake Twp 38.00 S N/S Range 17.00 E E/W WM
 Sec 17 SE 1/4 of the SE 1/4 Tax Lot 500
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

16684 HWY 140E LAKEVIEW OR

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening	08-17-2007			12
Completed Well	08-01-2008			12

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
08-01-2008	542	574	300			12

(11) WELL LOG Ground Elevation _____

Material	From	To
MEDIUM HARD RIOLITE	131	542
BROKEN HARD RIOLITE	542	574
HARD RIOLITE	574	664

Date Started 08-17-2007 Completed 08-01-2008

(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 1758 Date 08-18-2008
 Electronically Filed
 Signed RYON FREEMAN (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 693 Date 08-18-2008
 Electronically Filed
 Signed ROGER W CHANCELLOR (E-filed)
 Contact Info (optional)

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

RECEIVED

WATER WELL REPORT

STATE OF OREGON

RECEIVED BY OWRD
385/17E-1600

Lake
1945

STATE ENGINEER, SALEM, OREGON (Please type or print)
within 30 days from the date of well completion.

WATER RESOURCES DEPT.
SALEM, OREGON

State Well No. 385/17E-1600
State Permit No. DEC 18 2013

SW SW 76 385 17 E

(1) OWNER:

Name **JACK SPARROWK**
Address **DREWS VALLEY LAKEVIEW, OREGON 97630**
MAY 19 2014

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 13.

(3) TYPE OF WELL:

Rotary Cable Dug
Driven Jetted Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
14" Diam. from 0 ft. to 41.5 ft. Gage .250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? Yes No.
Type of perforator used **FACTORY-CUT**
Size of perforations 1/8, 3/16 in. by 3 in.
2,080 perforations from 115 ft. to 375 ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? **Contractor**
Yield: 1,000 gal./min. with 108 ft. drawdown after 25 hrs.
900 " 84 " 25 "
800 " 77 " 25 "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water 58° Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used **Cement-Bentonite Slurry**
Well sealed from land surface to _____ 20 ft.
Diameter of well bore to bottom of seal _____ 24 in.
Diameter of well bore below seal _____ 20 in.
Number of sacks of cement used in well seal _____ 21 sacks
Number of sacks of bentonite used in well seal _____ 3 sacks
Brand name of bentonite **Baroid Quick-Gel**
Number of pounds of bentonite per 100 gallons of water _____ 15 lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: 1/2 to 1/4"
Gravel placed from _____ 20 ft. to _____ 407 ft.

(10) LOCATION OF WELL:

County **LAKE** Driller's well number **AR-543-78**
T. R. W.M.

Bearing and distance from section or subdivision corner
SEE ATTACHED DOCUMENT

(11) WATER LEVEL: Completed well.

Depth at which water was first found _____ 115 ft.
Static level _____ 47 ft. below land surface. Date **11/1/78**
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____ 8 Inch
Depth drilled _____ 860 ft. Depth of completed well _____ 860 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Soil Zone (Adobe & Sm. Bould)	0	2	
Basalt Boulders (Cemented)	2	22	
Obsidian Boulders (Cemented)	22	60	
Silicate Bonded Sedimentary			
Rock (Very Hard)	60	70	
Faulted, Angular Basalt (Pink)	70	120	
H ₂ O Aquifer 30 G.P.M.			47
Fractured Basalt With Ginders	120	160	
Silicate-Cemented Quartz			
With Loose, Fine White Sand			
H ₂ O Zone 300-400 G.P.M.	160	300	
Fractured Obsidian Cemented			
With Silicate			
H ₂ O Zone 500-600 G.P.M.	300	400	
Obsidian (solid)	400	610	
Silicate-Cemented Obsidian			
H ₂ O Zone 150-200 G.P.M.	610	730	
Basalt, Fractured, Red	730	800	
Basalt, Fractured, Brown	800	860	

Work started **9/20/1978** Completed **11/1/1978**
Date well drilling machine moved off of well **10/16/1978**

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] **Gary Stoksberry** Date **11/1/1978**
(Drilling Machine Operator)

Drilling Machine Operator's License No. **801**

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 **RAPID WATER WELL DRILLING COMPANY**
(Person, firm or corporation) (Type or print)

Address **545 NORTH G ST., Lakeview, Oregon**

RECEIVED
Gary Stoksberry
(Water Well Contractor)

Contractor's License No. **652** Date **11/1/1978**

(USE ADDITIONAL SHEETS IF NECESSARY)

SP-40000-110