

LAKE 50786

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"from"

STATE OF OREGON WATER SUPPLY WELL REPORT

FEB 10 1999

WELL I.D. # L 18127 START CARD # 110229

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT. SALEM, OREGON

(1) OWNER: Well Number Name Robert W. Simpson Address P.O. Box 535 City Christmas Valley State Ore Zip 97641

(9) LOCATION OF WELL by legal description: County LAKE Latitude Longitude Township 27 Near S Range 18 E or W. WM. Section 5 NW 1/4 SW 1/4 Tax Lot 400 Lot Block Subdivision Street Address of Well (or nearest address) OFF Military Ave Christmas Valley, Ore.

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

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

(10) STATIC WATER LEVEL: 38 ft. below land surface. Date 2-5-99 Artesian pressure lb. per square inch. Date

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

(11) WATER BEARING ZONES: Depth at which water was first found 114

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 125 ft. Explosives used [] Yes [X] No Type Amount

Table with 4 columns: From, To, Estimated Flow Rate, SWL. Row 1: 114, 117, 50+, 28

Table with 6 columns: HOLE, SEAL, Diameter, From, To, Material, From, To, Sacks or pounds. Row 1: 11, 0, 50, Cement, 0, 50, 27 sacks

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other 3/8 Hole Plug Poured Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(12) WELL LOG: Ground Elevation

Table with 7 columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 6", 49, 250, [X] [] [] [] Liner: NONE

Table with 4 columns: Material, From, To, SWL. Rows: Top Soil Sandy Brn (0, 2), Gravel (2, 27), Clay Gray (27, 114), Rubble Course (114, 117, 28'), Clay Gray (117, 125)

(7) PERFORATIONS/SCREENS: [] Perforations [] Screens Method Type Material From To Slot size Number Diameter Tube/pipe size Casing Liner

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(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailor [X] Air [] Flowing Artesian Yield gal/min Drawdown Drill stem at Time

Date started 2-5-99 Completed 2-6-99 (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.

Temperature of water 50 Depth Artesian Flow Found Was a water analysis done? NO [] Yes By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

Signed [Signature] Date 2-7-99 (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.

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the

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

*Lake
669*

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

RECEIVED From *265/18E-23*

MAR 18 1977

State Well No. *265/18E-23*

State Permit No. _____

WATER RESOURCES DEPT.

(1) OWNER:

Name *Timothy Stubbart*
Address *PO Box 19279, Brooks Ave. 97305*

(2) TYPE OF WORK (check):

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

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

12" Diam. from *7.1 ft.* ft. to *103* ft. Gage *275*
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Type of perforator used *Acetylene* Perforated? Yes No.
Size of perforations *1/4* in. by *9* in.
160 perforations from *73* ft. to *95* 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?
Id: _____ gal./min. with _____ ft. drawdown after _____ hrs.
" " " " " " "
" " " " " " "
Bailer test *100* gal./min. with *0* ft. drawdown after *2* hrs.
Artesian flow _____ g.p.m.
Temperature of water *42°* Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used *Permenent Cement*
Well sealed from land surface to *70* ft.
Diameter of well bore to bottom of seal *7.6* in.
Diameter of well bore below seal *12* in.
Number of sacks of cement used in well seal *21* sacks
Number of sacks of bentonite used in well seal _____ sacks
Brand name of bentonite _____
Number of pounds of bentonite per 100 gallons
of water _____ 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: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County *Lake* Driller's well number _____
N 1/2 SW 1/4 Section 23 T. 26 S R. 18 E W.M.
Bearing and distance from section or subdivision corner
Center of N 1/2

(11) WATER LEVEL: Completed well.

Depth at which water was first found *73* ft.
Static level *21* ft. below land surface. Date *3-15-77*
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing *12"*
Depth drilled *415* ft. Depth of completed well *415* 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
<i>Soil, Brown</i>	<i>0</i>	<i>0</i>	
<i>Clay, Brown</i>	<i>0</i>	<i>40</i>	
<i>Clay, Green</i>	<i>40</i>	<i>73</i>	
<i>Sandstone & Clay conglomerate, Blk</i>	<i>73</i>	<i>83</i>	<i>28</i>
<i>Clay, Green</i>	<i>83</i>	<i>115</i>	
<i>Sandstone & Clay conglomerate, Blk</i>	<i>115</i>	<i>135</i>	<i>27</i>
<i>Sandstone, Brown, hard</i>	<i>135</i>	<i>145</i>	
<i>Clay, Brown</i>	<i>145</i>	<i>185</i>	
<i>Basalt, fractured, Blk, hard</i>	<i>185</i>	<i>192</i>	<i>22</i>
<i>Sandstone, Blk</i>	<i>192</i>	<i>220</i>	
<i>Rock, hard, grey</i>	<i>220</i>	<i>250</i>	<i>21</i>
<i>Sandstone & Clay conglomerate</i>	<i>250</i>	<i>362</i>	
<i>Permian, white</i>	<i>362</i>	<i>365</i>	
<i>Sand, coarse, Blk, Bellied with thin</i>	<i>365</i>	<i>400</i>	<i>21</i>
<i>Gravel, Fine, Blk</i>	<i>400</i>	<i>415</i>	

JUN 18 2014

SALEM, OR

Work started *2-25* 1977 Completed *3-15* 1977

Date well drilling machine moved off of well *3-15* 1977

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] *Alvin Schunk* Date *3-15*, 1977
(Drilling Machine Operator)

Drilling Machine Operator's License No. *960*

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 *Schunk's Drilling Service*
(Person, firm or corporation) (Type or firm)

Address *4911 SW Elkholm, Redmond, Ore.*

[Signed] *Alvin Schunk*
(Water Well Contractor)

Contractor's License No. *627* Date *3-15*, 1977

LAKE 52081

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

"TO"
WELL LABEL # L 93329
START CARD # 189560

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

(1) LAND OWNER Owner Well I.D.
 First Name Heidi Last Name Glassman
 Company _____
 Address PO Box 390
 City CHRISTMAS VALLEY State OR Zip 97641

(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 Injection
 Thermal Other _____

(5) BORE HOLE CONSTRUCTION Special Standard: Yes (attach copy)
 Depth of Completed Well 453 ft.

BORE HOLE			SEAL			
Dia	From	To	Material	From	To	Amount Scks/lbs
19"	0	99	Cement	99	79	30 SCK
14"	79	453		25	20	20 SCK

How was seal placed: Method A B C D E
 Other 358 Bulk Plug
 Backfill placed from 79 ft. to 25 ft. Material BENT
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		16"	HL	99	453		X		X	

Shoe Inside Outside Other Location of shoe(s) _____
 Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type _____ Material _____

Perf	Scrn	Casing	Linr	Screen Dia	From	To	Screen/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)
<u>150+</u>		<u>455</u>	<u>hr 2</u>

Temperature 53 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below)

From	To	Description	Depth (ft)

(9) LOCATION OF WELL (legal description)
 County Lake Twp 27 N or S Range 18 E or W W.M.
 Sec 5 SE 1/4 of the SW 1/4 Tax Lot 200
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street Address of Well (or nearest address) NO A 1045 S
455INGR

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Predeepening	<u>07-1-08</u>			<u>30'</u>
Completed Well	<u>11-1-08</u>			<u>111'</u>

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found _____

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>4-3-08</u>	<u>115</u>	<u>150</u>	<u>800'</u>			<u>30'</u>
	<u>450</u>	<u>453</u>	<u>100'</u>			<u>30'</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
TOP SOIL	0	2
Tan Clay	2	25
Green Clay	25	115
Pumice gravel	115	150
Brown Clay	150	170
Brown Clay Pumice	170	215
Broken Lava Rock	215	250
Hard Basalt Grt	250	400
Hard Lava Rock	400	450
Broken Lava Rock	450	453

Date Started 3-24-08 Completed 4/1/08 / SALEM, OR

(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 1654 Date 5-17-08
 Signed _____

(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 1654 Date 5-13-08
 Signed _____
 Contact Info. (optional) _____

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MAY 30 2008

WATER RESOURCES DEPT