

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

WASC 52152

6/21/2014

WELL I.D. LABEL# L114528

START CARD # 1022832

ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D. \_\_\_\_\_  
First Name BOB Last Name KREIN  
Company \_\_\_\_\_  
Address PO BOX 158  
City MAUPIN State OR Zip 97037

(2) TYPE OF WORK

New Well  Deepening  Conversion  
 Alteration (complete 2a & 10)  Abandonment (complete 5a)

(2a) PRE-ALTERATION

Dia + From To Gauge Stl Plstc Wld Thrd  
Casing: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]  
Material From To Amt sacks/lbs  
Seal: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

(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

Depth of Completed Well 416.00 ft. Special Standard  (Attach copy)

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
12	0	38	Bentonite Chips	0	38	22	S
8	38	416					

How was seal placed: Method  A  B  C  D  E

Other POURED DRY

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount \_\_\_\_\_ Actual Amount \_\_\_\_\_

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	8	<input checked="" type="checkbox"/>	2	38	.250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	6	<input type="checkbox"/>	0	416	.188	<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 AIR PERFORATOR

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/	Casing/	Screen	Scrn/slot	Slot	# of	Tele/		
Perf	Liner	Dia	From	To	width	length	slots	pipe size
		6	339	411	.125	2	1890	

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
100		400	1

Temperature 55 °F Lab analysis  Yes By \_\_\_\_\_

Water quality concerns?  Yes (describe below) TDS amount

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County WASC Twp 5.00 S N/S Range 15.00 E E/W WM  
Sec 2 NE 1/4 of the SE 1/4 Tax Lot 100  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or 45.16063889 DMS or DD  
Long \_\_\_\_\_ " or -120.89219444 DMS or DD  
 Street address of well  Nearest address

BAKE OVEN RD  
MAUPIN, OR

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	6/18/2014			230

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 330.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
6/17/2014	330	416	100			230

(11) WELL LOG

Ground Elevation 2326.00

Material	From	To
CLAY	0	1
BASALT CLAY BROWN	1	30
BASALT GRAY	30	44
BASALT BROWN	44	96
BASALT GRAY	96	133
BASALT BROWN	133	152
BASALT BLACK GRAY	152	245
BASALT GRAY BROWN	245	266
BASALT GRAY	266	315
BASALT WEATHERED LAYER	315	350
BASALT GRAY FRACTURED VESICULAR LAYER	350	402
BASALT WEATHERED LAYERS	402	416

RECEIVED BY OWRD

AUG 04 2014

SALEM, OR

Date Started 6/16/2014 Complete 6/18/2014

(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 758 Date 6/21/2014

Signed THOMAS 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 6/21/2014

Signed JACK ABBAS (E-filed)

Contact Info (optional) \_\_\_\_\_

ORIGINAL - WATER RESOURCES DEPARTMENT



STATE OF OREGON SEP 25 2002  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.763) WATER RESOURCES DEPT  
SALEM, OREGON

WELL I.D. # L 43352  
START CARD # W146019

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

(1) LAND OWNER Well Number 21  
Name BOB KEVIN  
Address PO BOX 158  
City MANPIN State OR Zip 97037

(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 365 ft.  
Explosives used  Yes  No Type Amount

HOLE SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10	0	18	GRAVEL	0	18	12
6	18	363				

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

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: 6	+2	18	.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"/>

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

(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  
Yield gal/min 25 Drawdown 100% Drill stem at 362.5 Time 1 hr.

Temperature of water 57 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: RECEIVED BY OWRD

(9) LOCATION OF WELL by legal description:  
County WASC Latitude Longitude  
Township 5 S N or S Range 15 E E or W. WM.  
Section 2 SE 1/4 SE 1/4  
Tax Lot 100 Lot Block Subdivision  
Street Address of Well (or nearest address) BARKOVIC RD  
MANPIN OR 97037

(10) STATIC WATER LEVEL:  
192 ft. below land surface. Date 9-18-02  
Artesian pressure lb. per square inch Date

(11) WATER BEARING ZONES:

Depth at which water was first found 340

From	To	Estimated Flow Rate	SWL
340	365	27 GPM	192

(12) WELL LOG:  
Ground Elevation 1700

Material	From	To	SWL
SOIL	0	2.5	
BROWN + GREY ROCK	2.5	34	
GREY ROCK	34	58	
BROWN ROCK	58	69	
BROWN GREY ROCK	69	80	
BROWN ROCK	80	101	
GREY ROCK	101	120	
GREY + BROWN ROCK CINDERS	120	138	
BROWN BROWN ROCK	138	175	
GREY ROCK	175	243	
GREY + BROWN ROCK	243	281	
GREY ROCK	281	340	
BROWN + GREY BROWN WITH TAN + YELLOW CLAY (WB)	340	365	192

Date started 9-10-02 Completed 9-18-02

(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 \_\_\_\_\_ Date \_\_\_\_\_ WWC Number \_\_\_\_\_

(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 Jo Janta \_\_\_\_\_ Date 9-24-02 WWC Number 1782