

(START CARD) # W 114058

(1) OWNER: _____ Well Number _____
Name MAC KERNS
Address 45296 POCAHONTIS
City RAINES State OR Zip 97833

☐ New Well ☐ Deepening ☒ Alteration (repair/recondition) ☐ Abandonment

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other

☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

Explosives used ☐ Yes ☒ No Type _____ Amount _____

Diameter	From	To	Material	From	To	Sacks or pounds
18"	0	18	PORTLAND CEMENT	0	18	24 1/2 SACKS

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

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

☐ Perforations Method _____

☐ Screens Type / _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

☐ Pump	☐ Bailer	☐ Air	☐ Flowing ☐ Artesian
Yield gal/min	Drawdown	Drill stem at	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: _____

County BAKER Latitude _____ Longitude _____
Township 9 N or S Range 41 E or W. WM.
Section 14 NW 1/4 SW 1/4
Tax Lot 1302 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1/2 MILE SOUTH
OF RUCKLES CR. LP.

117½ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch. Date _____

Depth at which water was first found

From	To	Estimated Flow Rate	SWL
N/A			

Ground Elevation _____

[illegible]

RECEIVED

APR 23 2001

~~WATER RESOURCES DEPT.~~
~~SALEM, OREGON~~

Date started 4/3/01 Completed 4/4/01

(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 TRAINEE
Date 4/9/01

(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 Carl D. J. J. WWC Number 494 Date 4/9/01