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OCT 15 2001

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT.

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

WELL I.D. # L 150691
START CARD # 128596

Bake 50883

(1) LAND OWNER - Well Number L50691
Name Allen Farms
Address 44821 Rocahantas Rd.
City Haines State OR Zip 97833

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other Reverse Rotary

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 398 ft.
Explosives used Yes No Type _____ Amount _____

HOLE SEAL
Diameter From To Material From To Sacks or pounds
20" 0 410 Bentonite 0 60' 5 yds
The reason is Rathole to get casing in bore hole & its clay.
How was seal placed; Method A B C D E
 Other Overbore

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 100 ft. to 410 ft. Size of gravel 3/8"

(6) CASING/LINER:
Diameter From To Gauge Steel Plastic Welded Threaded
Casing: 110" +2 80' .375
110" 240 280 .375
Liner: _____

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

(7) PERFORATIONS/SCREENS:
 Perforations Method bronze Wire Wrap
 Screens Type _____ Material Wiltsted
Slot size Number Diameter Tele/pipe size Casing Liner
80 240 .035 110"
280 398 .035 110"

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing
Yield gal/min Drawdown Drill stem at Time
1000 200' _____ 4 hr.

Temperature of water 59 Depth Artesian _____
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 Baker Latitude _____ Longitude _____
Township 8 N or S Range 39 E or W. WM.
Section 8 SE 1/4 NE 1/4
Tax Lot 3000 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) none assigned.

(10) STATIC WATER LEVEL:
28 ft. below land surface. Date 10-20-01
Artesian pressure _____ lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWL
all Sand & Gravel	Below		
28' Depth			

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Top Soil	0	5	
Sand & Gravel	5	8	
Brown Clay w/ gravel	8	14	
Brown Clay	14	62	
Brown Clay w/ gravel	62	148	
Brown Clay	148	152	
Brown Clay w/ gravel	152	169	
Sand & Gravel	169	172	
Clay, Sand & Gravel	172	224	
Brown Clay	224	244	
Clay & Gravel mix	244	295	
Clay & Sand	295	297	
Brown Clay	297	307	
Sand, gravel & Clay	307	410	

Date started 9-13-01 Completed 10-20-01

(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 Kevin Chastain 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
Signed [Signature] WWC Number 1506 Date 10-11-01

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WATER RESOURCES DEPT. SALEM, OREGON