

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

APR 24 1991

15S/15E/2/ac

WATER WELL REPORT (START CARD) # 27923

(1) OWNER:

Name Joe Waibel
Address Rt 1 Box 318
City Powell Butte State Or Zip 97753

Well Number: 3

(2) TYPE OF WORK:

☒ New Well ☐ Deepen ☐ Recondition ☐ Abandon

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable
☐ Other

(4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Other Test Well

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes ☐ No ☒ Depth of Completed Well 815 ft.
Explosives used ☐ ☒ Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	19	Bentonite	0	19	9
8	19	815				

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

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:	8" +1	19	19	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☐ Screens Type _____ Material _____

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

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing
☐ Artesian

Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.

Temperature of water 58° 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: _____

(9) LOCATION OF WELL by legal description:

County Crook Latitude _____ Longitude _____
Township 15S N or S, Range 15E E or W, WM.
Section 21 SW $\frac{1}{4}$ NE $\frac{1}{4}$ of NW $\frac{1}{4}$
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:

478 ft. below land surface. Date 4/11/91
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
478	815		478

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Top Soil	0	4	
Hard Gray Basalt	4	35	
Orange Conglomerate	35	43	
Brown Sandstone	43	60	
Hard Gray Basalt	60	96	
Hard Red Basalt	96	111	
Hard Gray Basalt	111	213	
Broken 150,170			
Broken Basalt	213	235	
Lost Circulation			
Hard Basalt	235	237	
Brown Sandstone	237	330	
Yellow clay & gravel	330	415	
Brown Sandstone	415	462	
Hard Gray Basalt	462	478	
Broken Basalt W/B	478	480	
Hard Gray Basalt	480	501	
Mild Red Basalt W			
Yellow Claystone	501	520	
Light Brown Clay	520	697	
Yellow Clay	697	715	
Hard Blue Clay	715	811	
Hard Gray Basalt	811	815	

Date started 3/29/91 Completed 4/11/91

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed [Signature] 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed Robert Buckner WWC Number _____
Date _____