

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

RECEIVED JUN 27 1994

145/14E/27ca

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Revised

WATER RESOURCES DEPT. (START CARD) # 63946 (revised)
SALEM, OREGON

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

(1) OWNER: Well Number # 2
Name Ted Hull / Broken Rim Ranch

Address Rt. 1 Box 107
City Redmond State Or. Zip 97756

(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 160 ft.
Explosives used Yes No Type Amount

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
21"	0	165	cement	0	88	3 yds slurry

How was seal placed: Method A B C D E
 Other pumped vis 3" tremie
Backfill placed from ___ ft. to ___ ft. Material
Gravel placed from 88 ft. to 160 ft. Size of gravel 3/4 min

(6) CASING/LINER:

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: 10"	+2	160	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations Method factory
 Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
100	160	1/8	1000	10"		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
600 gpm	60"	150	5 hrs

Temperature of water 60 Depth Artesian Flow Found -0-
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: watermaster wanted sealed to 60' min.

(9) LOCATION OF WELL by legal description:
County Crook Latitude Longitude
Township 14 S N or S Range 14 E E or W. WM.
Section 27 NE 1/4 SW 1/4
Tax Lot 100 Lot Block Subdivision
Street Address of Well (or nearest address) Rt. 1 Box 107 Redmond, Or. (0 Neil Hwy)

(10) STATIC WATER LEVEL:
59' ft. below land surface. Date 5-15-94
Artesian pressure -0- lb. per square inch. Date -0-

(11) WATER BEARING ZONES:

Depth at which water was first found 27'

From	To	Estimated Flow Rate	SWL
27'	76'	50 gpm	27
90'	130'	600 gpm	59

(12) WELL LOG:
Ground Elevation

Material	From	To	SWL
top soil	0	6	
brown sandy clay	6	27	
med. gravel	27	46	
grey clay	46	54	
sticky clay	54	68	
black sand	68	76	
grey clay	76	80	
sticky grey clay	80	92	
fine gravel & sand w/b	92	134	59'
grey clay	134	157	"
grey sandstone	157	160	"
black basalt	160	165	"

Date started 5-12-94 Completed 5-15-94

(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 Bill C... WWC Number 1555 Date 6-22-94

(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 Cont... WWC Number 741 Date 6-22-94

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

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WATER RESOURCES DEPT. (START CARD) #
 SALEM, OREGON

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 Name Ted Hull / Broken Rim Ranch
 Address Rt. 1, Box 107
 City Redmond State Or. Zip 97756

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 New Well Deepening Alteration (repair/recondition) Abandonment

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

(4) PROPOSED USE:
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 Thermal Injection Livestock Other

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Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Final location of shoe(s) _____

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
600 gpm	60'	150'	5 hr

Temperature of water 60 Depth Artesian Flow Found -0-
 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 watermaster
 Depth of strata: wanted sealed to 60' min.

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 County Crook Latitude _____ Longitude _____
 Township 14 S N or S Range 14 E E or W. WM.
 Section 27 NE 1/4 SW 1/4
 Tax Lot 100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Rt. 1, Box 107
Redmond, Or. (O'Neil Area)

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59' ft. below land surface. Date 5-15-94
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Date started 5-12-94 Completed 5-15-94

(unbonded) Water Well Constructor Certification:
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Signed William J. [Signature] WWC Number 1555
 Date 6-6-94

(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 Art Clauson WWC Number 741
 Date 6-6-94