

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

CROO
32370

155/100E/21

(START CARD) # 71874

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

(1) OWNER: Well Number 743
Name Merik Fleming
Address 60725 Davis Loop
City Rainville State OR Zip 97754

(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 400 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12	0	29 1/2	OCIPAK	0	20	9
8	29 1/2	400	EMER	20	29 1/2	12

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	11 1/2	29 1/2	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"/>

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Tele/pipe size	Casing	Liner
							<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Artesian
Yield gal/min 25 Drawdown unknown Drill stem at 400 Time 1 hr.

Temperature of water 52 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 15 N or S Range 16 E or W. WM.
Section 21 1/4 1/4
Tax Lot 807 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Juniper 2404 RD

(10) STATIC WATER LEVEL:
167 ft. below land surface. Date 6-5-95
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 200

From	To	Estimated Flow Rate	SWL
<u>200</u>	<u>400</u>	<u>25</u>	<u>167</u>

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Red Red Bed	0	5	
Brown sandstone	5	102	
Brown clay	102	146	
Broken Rocks	146	161	
Brown sandstone	161	383	
yellow clay	383	391	
Blue Gray clay	391	400	

Date started 6-2-95 Completed 6-5-95

(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 _____ 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 Daniel M. [Signature] WWC Number 584 Date 6-11-95