STATE OF OREGON

# WATER WELL REPORT

(as required by ORS 537.765)

CROO 432

RECEIVED

AUG 24 1992

WATER RESOURCES DEPT SALEM, OREGON

155/16E/5da

(START CARD) # 42016

**(1) OWNER:** Well Number

Name Tom Johnson

Address 785 Combs Flat Rd.

City Prineville State Or. Zip 97754

**(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

**(5) BORE HOLE CONSTRUCTION:**

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 30 ft.

Explosives used ☐ Yes ☒ No Type — Amount —

| HOLE Diameter | From | To | SEAL Material | From | To | Amount sacks or pounds |
|---|---|---|---|---|---|---|
| 10" | 0 | 20 | Bentonite | 0 | 20' | 4 sacks |
| 6" | 20 | 30 | — | | | — |

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

☒ Other Tramie Pipe

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: | 6" | +1 | 30' | .250 | ☒ | ☐ | ☒ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| Liner: | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |

Final location of shoe(s) None

**(7) PERFORATIONS/SCREENS:**

☒ Perforations Method Cutting Torch

☐ Screens Type — Material —

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|---|---|---|---|---|---|---|---|
| 20 | 30 | 1/16x6 | 72 | 6" | | ☒ | ☐ |
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |
| | | | | | | ☐ | ☐ |

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

☐ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| 20 | 5' | | 1 hr. |
| | | | |
| | | | |

Temperature of Water 56 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 5 DA NE ¼ SE ¼

Tax Lot 400 Lot Block Subdivision

Street Address of Well (or nearest address) 785 Combs Flat Rd. Prineville, Or. 97754

**(10) STATIC WATER LEVEL:**

20 ft. below land surface. Date 8-7-92

Artesian pressure — lb. per square inch. Date

**(11) WATER BEARING ZONES:**

Depth at which water was first found 20'

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| 20' | 30' | 20 GPM. | 20' |
| | | | |
| | | | |
| | | | |

**(12) WELL LOG:**

Ground elevation

| Material | From | To | SWL |
|---|---|---|---|
| Top Soil | 0 | 3 | |
| Sandy Brown Clay | 3 | 20 | |
| Gravel (Water Bearing) | 20 | 30 | 20' |

Date started 8-7-92 Completed 8-7-92

**(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.

WWC Number

Signed 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. WWC Number 444

Signed Archie Yt Date 8-7-92

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