

16517E133
20649

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

C100
045

(START CARD) # _____

(1) OWNER:

Name Jasper Knoll's water dist - Elm Springs Beck
Address P.O. Box 203
City Prineville, Or State Or Zip 97154

Well Number: 01277

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

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
6	225-335	7		
<i>Well was already sealed</i>				

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	5'	+1	315	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) NONE

(7) PERFORATIONS/SCREENS:

Perforations Method sawed
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
225	315	1/8 x 6	300			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailor Air Flowing Artesian

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

Temperature of water 60 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 Cook Latitude _____ Longitude _____
Township 16 North Range 17 East W, WM.
Section 33 Tax Lot orig. section Block _____ Subdivision _____
Street Address of Well (or nearest address) Lot 26 - Block 3 Jasper Knoll's water dist - Prineville, Or

(10) STATIC WATER LEVEL:

220 ft. below land surface. Date 8-20-90
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 220'

From	To	Estimated Flow Rate	SWL
220	225	2 GPM	220

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Gray clay	220	310	220
Gray clay stone	310	325	220
Gray clay	325	335	220

RECEIVED

SEP 24 1990

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 8-20-90 Completed 8/27/90

(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 Orchie Fox Date 8/29/90