

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

CROO
479

16S/21E/3

(START CARD) # 40739

(1) OWNER:

Well Number 684
Name GUTERREZ CATTLE COMPANY
Address PSR 3310
City POST State ORE Zip 97752

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

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
16	0	38	CEMENT	0	38	20
12	38	260				

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: 12"	+2	38	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 _____
 Screens Type _____ Material _____

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

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
4000	UNKNOWN	260	1 hr.

Temperature of Water 60° Depth Artesian Flow Found 205

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 16S N or S. Range 21E E or W. WM. _____
Section 3 12 7 4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) NORTH PAULINA

(10) STATIC WATER LEVEL:

+2 ft. below land surface. Date 5-4-92
Artesian pressure 0 lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 205

From	To	Estimated Flow Rate	SWL
205	260	4000	

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
TOP SOIL	0	3	
GREY ROCK	3	205	
BROKEN ROCK	205	260	

OCT 28 1992
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 4-21-92 Completed 5-4-92

(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.

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

Signed Frank M. [Signature] WWC Number 584
Date 7-15-92