RECEIVED

JUN 18 1997

WATER RESOURCES DEPT.
SALEM, OREGON

CROO 50272

WELL I.D. # LO 9691

(START CARD) # 94894

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

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

(1) OWNER: Well Number _____

Name DARYLE ASHCRAFT

Address 660 S ELM ST

City PRINEVILLE 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 29 ft.

Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
10"	0	18	BENTONITE	0	18	11 SACKS
6"	18	29				

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

☒ Other BENTONITE POWDER DRY

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	31'	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	NONE				☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) 31'

(7) PERFORATIONS/SCREENS:

☒ Perforations Method TORCH

☐ Screens Type SLOT Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
21'	26'	1/8	50	4"x6"	6"x.250	☒	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
14 Gpm	6'		1 hr.

Temperature of water 58° 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 ⊗ Range 16 ⊗ or W. WM.

Section 5 NE 1/4 SW 1/4

Tax Lot 8100 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) 660 S. ELM ST. PRINEVILLE OR.

(10) STATIC WATER LEVEL:

12 ft. below land surface. Date 6/6/97

Artesian pressure 0 lb. per square inch. Date 6/6/97

(11) WATER BEARING ZONES:

Depth at which water was first found 21'

From	To	Estimated Flow Rate	SWL
21'	26'	14 Gpm	12

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
DARK BROWN CLAY	0	8	
MED FINE GRAVEL & SAND	8	12	
BROWN CLAY	12	21	
FINE GRAVEL + MED SAND	21	26	12
FINE BROWN SILTY SAND	26	31	

Date started 6/6/97 Completed 6/6/97

(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.

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

WWC Number 1555

Signed Bill [illegible] Date 6/14/97

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER