

SEP - 2 1997

WELL I.D.#

407557

Croo
50307

(START CARD) # 097712

(1) OWNER: Well Number 1
 Name GREG MCCLURE
 Address 316 N STARLING WAY
 City ANAHEIM State CAL Zip 92807

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

HOLE		SEAL	
Diameter	From To	Material	From To
12	0 28	CEMENTITE	0 28
8	28 370		

Sacks or pounds 25 SACKS

How was seal placed: Method A B C D E
 Other POURED DOWN 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: 8	12	28	2.50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 7	7	367	1.625	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) NO SHOES USED

(7) PERFORATIONS/SCREENS:

Perforations Method MACHING CUT
 Screens Type SLOT Material STEEL

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
307	327	1/4"	240	7"	—	<input type="checkbox"/>	<input checked="" type="checkbox"/>
347	367	"	240	7"	—	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
50	—	309	1 hr.

Temperature of water 64.0 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 14 E or W. WM.
 Section 10 SE 1/4 NW 1/4
 Tax Lot 1 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) TWIN LAKES SUBDIVISION

(10) STATIC WATER LEVEL:
250 ft. below land surface. Date 8-20-97
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 300

From	To	Estimated Flow Rate	SWL
300	370	180+ GPM	250

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SEP 24 1997

(12) WELL LOG: WATER RESOURCES DEPT.
 Ground Elevation _____ SALEM, OREGON

Material	From	To	SWL
SANDY TOP SOIL	0	3	
BROWN CLAY & LAVA	3	6	
BROWN COARSE SAND	6	14	
BLACK LAVA	14	47	
BROWN LAVA	47	50	
RED CINDER CONG	50	53	
BROWN CONG.	53	90	
GREY LAVA	90	165	
RED SS CONG	165	200	
TAN SS CONG	200	240	
GREY LAVA	240	245	
BROWN LAVA	245	300	
VESICULAR VOLCANIC	300	310	250
BROWN ROCK	310	320	
DENSE BROWN SS	320	330	
BROWN ROCK	330	365	
DENSE BROWN SS	365	370	

Date started 8-7-97 Completed 8-20-97

(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 1556
 Signed David South Date 8-28-97