

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

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

(START CARD) #

78337

(1) OWNER: Well Number _____
Name Bred R. Khann
Address 1034 N.W. Juniper Ln.
City Madras State OR Zip 97741

(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 310 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>12</u>	<u>0</u>	<u>25</u>	<u>Bent.</u>	<u>0</u>	<u>25</u>	<u>12 sacks</u>
<u>8</u>	<u>25</u>	<u>310</u>				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other poured 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:	<u>8</u>	<u>+2</u>	<u>25</u>	<u>120</u>	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	<u>6</u>	<u>+1</u>	<u>310</u>	<u>188</u>	☒	☐	☒	☐
					☐	☐	☐	☐

Final location of shoe(s) _____
(7) PERFORATIONS/SCREENS:
☒ Perforations Method factory
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>310</u>	<u>290</u>	<u>15x3</u>	<u>100</u>	<u>6</u>	<u>1 1/2</u>	☐	☒
						☐	☐
						☐	☐
						☐	☐

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

	Yield gal/min	Drawdown	Drill stem at	Time
☐ Pump ☐ Bailer ☒ Air ☐ Flowing ☐ Artesian	<u>100 gal.</u>	<u>57 ft</u>	<u>290</u>	<u>1 hr.</u>

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 17 N or S Range 17 E or W. WM.
Section 34 W 1/4 SW 1/4
Tax Lot 3400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) SE Roberts Rd
Prineville OR 97754

(10) STATIC WATER LEVEL:
202 ft. below land surface. Date 7-1-98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 272'

From	To	Estimated Flow Rate	SWL
<u>272</u>	<u>310</u>	<u>100 gpm</u>	<u>195</u>

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>Top Soil</u>	<u>0</u>	<u>3</u>	
<u>Clay Stone Brown</u>	<u>3</u>	<u>95</u>	
<u>Basalt grey</u>	<u>95</u>	<u>134</u>	
<u>Basalt Brown</u>	<u>134</u>	<u>272</u>	<u>195</u>
<u>Sandstone Brown</u>	<u>272</u>	<u>310</u>	<u>195</u>

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AUG 16 1999

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 6/27/98 Completed 7/1/98

(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.

Signed Allen Broderick WWC Number 1371
Date 7/6/98

(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.

Signed Allen Broderick WWC Number 1371
Date 7/6/98