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

JAN 11 1999

WATER RESOURCES DEPT.

WELL I.D. # L 23657
START CARD # 102281

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

(1) OWNER: Well Number _____
Name John & Cindy Kimball
Address P.O. Box 110
City Powell Butte State Ore Zip 97753(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 704 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12"	0	19'	bentonite	0	19'	15sks
8"	-19	704'				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other pouredBackfill 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"	+2	-19'	.250	☒	☐	☒	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
Liner: 6"	-4	-704'	.188	☒	☐	☒	☐
				☐	☐	☐	☐

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
-684	-704	1/8x3	236	6"		☐	☒
						☐	☐
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
20	0		4hr ☒ Ar.

Temperature of water 64 Depth Artesian Flow Found _____
Was a water analysis done? ☒ Yes By whom Coffey Labs
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 17S N or S Range 15E E or W. WM.
Section 18 SW 1/4 SW 1/4
Tax Lot 604 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____
End of Horsell Rd. Turn left

(10) STATIC WATER LEVEL:

640 ft. below land surface. Date 12-28-98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 640'

From	To	Estimated Flow Rate	SWL
640'	704'	20	640

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
sandy top soil blds	0	2'	
fract gray lava	2'	49'	
red cinders, brwn clay	49'	71'	
brkn rock void n.r.	71'	129'	
3 yds cement			
fract gray lava	129'	147'	
void & crevis n.r.	147'	190'	
3 yds cement			
hard no return	190'	271'	
brkn gray lava	271'	289'	
soft n.r.	289'	325'	
brkn gray lava crevis n.r.	325'	390'	
3 yds cement			
brkn gray lava	390'	428'	
red rock congl	428'	449'	
very brkn & crevis	449'	704'	640'
with voids n.r.			
very difficult drilling!			

Date started 12-5-98 Completed 12-29-98

(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.

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 1658Signed John Skelton Date 12-29-98

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