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WATER RESOURCES DEPT.
SALEM, OREGON

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.

WELL I.D. # L 24950

STATE CARD # 128066

(1) OWNER: Well Number 4,126

Name ALLAN + CHERI SHRUM

Address 1014 NW MAHOGANY

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 30' ft.

Explosives used ☐ Yes ☒ No Type ____ Amount ____

HOLE

Diameter	From	To
10"	0	18
6"	18	30

SEAL

Material	From	To	Sacks or pounds
BENTONITE	0	18	10 SACKS

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

☒ Other BENTONITE 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:	6"	+1	30	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	5"	10'	30	SCH 40	☐	☒	☐	☒
					☐	☐	☐	☐

Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS:

☒ Perforations Method FACTORY

☐ Screens Type SLOTTED Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
20'	30'	1/8"	1/100	1/8 4	6" x .250	☒	☐
20'	30'	1/10	3,000	0.20	5" SCH 40	☐	☒
						☐	☐
						☐	☐
						☐	☐

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

☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
30+	21'		4HR +1HR

Temperature of water 58° Depth Artesian Flow Found ____

Was a water analysis done? ☒ Yes By whom C.W.D.

Did any strata contain water not suitable for intended use? ☐ No ☐ 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 16 (E) or W. WM.

Section 25 SW 1/4 SW 1/4

Tax Lot 9400 Lot ____ Block ____ Subdivision ____

Street Address of Well (or nearest address) 550 SE 5TH ST. PRINEVILLE, OR 97754

(10) STATIC WATER LEVEL:

6' ft. below land surface. Date 3/1/00

Artesian pressure 0 lb. per square inch. Date 3/1/00

(11) WATER BEARING ZONES:

Depth at which water was first found 22'

From	To	Estimated Flow Rate	SWL
22'	29'	30+GPM	6'

(12) WELL LOG:

Ground Elevation ____

Material	From	To	SWL
BROWN CLAY + GRAVEL	0	22	
MEDIUM GRAVEL	22	24	6
GRAVEL + FINE SAND	24	29	

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Date started 2/29/00 Completed 2/29/00

(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 [signature] Date 3/10/00

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