

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

WELL I.D. # 41072  
START CARD # 133413

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

(1) OWNER: Well Number  
Name Rick Mayers / Prineville Resort  
Address 19600 SE Juniper Canyon Rd  
City Prineville State ORE Zip 97531

(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 300 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

| HOLE      |                          | SEAL             |  |
|-----------|--------------------------|------------------|--|
| Diameter  | From To                  | Material         | From To Sacks or pounds                |
| <u>12</u> | <u>0</u> <u>18 1/2</u>   | <u>Bentonite</u> | <u>0</u> <u>18 1/2</u> <u>10 sacks</u> |
| <u>8</u>  | <u>18 1/2</u> <u>300</u> |                  |  |

How was seal placed: Method  A  B  C  D  E  
 Other Poured in 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>+1 1/2</u> | <u>18 1/2</u> | <u>250</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| Liner: <u>6</u>  | <u>-10</u>    | <u>300</u>    | <u>188</u> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

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                               |
|----------------|----------------|------------|------------|----------|----------------|--------------------------|-------------------------------------|
| <del>240</del> | <del>260</del> |            |            |          |                | <input type="checkbox"/> | <input type="checkbox"/>            |
| <u>200</u>     | <u>220</u>     | <u>1/4</u> | <u>228</u> | <u>6</u> |                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| <u>240</u>     | <u>260</u>     | <u>1/4</u> | <u>228</u> | <u>6</u> |                | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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

Pump  Bailer  Air  Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time        |
|---------------|----------|---------------|-------------|
| <u>10</u>     | <u>0</u> | <u>290</u>    | <u>1 hr</u> |

Temperature of water 66 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 16 N or S Range 17 E or W. WM.  
Section 1 SE 1/4 NE 1/4  
Tax Lot None of \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 19600 SE Juniper Rd  
Prineville, Ore 97254

(10) STATIC WATER LEVEL:  
135 ft. below land surface. Date 7-26-00  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

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

| From       | To         | Estimated Flow Rate | SWL        |
|------------|------------|---------------------|------------|
| <u>136</u> | <u>137</u> | <u>10</u>           | <u>138</u> |

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

| Material                   | From       | To         | SWL        |
|----------------------------|------------|------------|------------|
| <u>TOP SOIL</u>            | <u>0</u>   | <u>3</u>   |            |
| <u>Brown Lava</u>          | <u>3</u>   | <u>105</u> |            |
| <u>Hard Basalt</u>         | <u>105</u> | <u>136</u> | <u>135</u> |
| <u>W.B. Brocken Basalt</u> | <u>136</u> | <u>147</u> |            |
| <u>Mild Lava</u>           | <u>147</u> | <u>230</u> |            |
| <u>Blue Clay Stone</u>     | <u>230</u> | <u>242</u> |            |
| <u>Brown Clay Stone</u>    | <u>242</u> | <u>250</u> |            |
| <u>Blue Clay Stone</u>     | <u>250</u> | <u>300</u> |            |

**RECEIVED**  
JUL 31 2000  
WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 7-25-00 Completed 7-26-00

(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.  
Helper  
Signed Jeff Randall WWC Number \_\_\_\_\_ Date 7-26-00

(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 Doug Selton WWC Number 1255 Date 7-26-00