

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.

Croo
51899

WELL I.D. # L 20237
START CARD # 107459

(1) OWNER: _____ Well Number _____
 Name Earl & Shirley Hayton
 Address 1366 N. Lococo Hwy
 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 60 ft.
Explosives used ☐ Yes ☒ No Type Amount

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	20	Bentonite	0	20	10 sacks
6"	20	60				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Tremie Pipe
 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	7 1/2	60		☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) None

[illegible]

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

☐ Pump	☒ Bailer	☐ Air	☐ Flowing ☐ Artesian
Yield gal/min	Drawdown	Drill stem at	Time
20	2		1 hr.

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 12 E or W. WM.

Section 34 NW 1/4 NE 1/4

Tax Lot 604 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) 13960 Ochoco Hwy
Prineville

(10) STATIC WATER LEVEL:
35 ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 50'

From	To	Estimated Flow Rate	SWL
50	60	40 20 GPM	35

(12) WELL LOG:

Ground Elevation _____

[illegible]

Date started 4/25/02 Completed 4/27/02
(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 [Signature] WWC Number _____
Date 5/10/02

(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 Archie Fox WWC Number 444 Date 5/10/02