

STATE OF OREGON
Water Supply Well Report

(as required by ORS 537.765)

CROO 52269

CROO

Received Date: 04-27-2004

Well ID Tag # L 67018

Start Card # 161044

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

(1) Owner Well Number: _____
 Name: **LARRY SMITH**
SHOUNS CROSS ROADS
 Street: **3004 NE TENNESSE LN**
 City: **PRINEVILLE** State: **OR** Zip Code: **97754**

(2) Type of Work
 New Alter (Recondition) Alter (Repair)
 Deepening Abandonment

(3) Drill Method
 Rotary Air Rotary Mud Cable Auger
 Other: _____

(4) Proposed Use
 Domestic Community Industrial Irrigation Injection
 Livestock Thermal Other: _____

(5) Bore Hole Construction
 Special Standards: Depth of completed well: **1,452.00 ft.**
 Explosives Used: Amount: _____ Type: _____

Hole			Seal			
Diameter	From	To	Mtrl	From	To	Sacks/lbs
20.00	0.00	20.00	GB	0.00	20.00	56
12.00	20.00	137.00	CE	20.00	137.00	101
8.00	137.00	1452.00				

 How was seal placed? **C** Other: **POURED DRY**
 Back fill placed from: _____ Material: _____
 Filter pack from: _____ Size: _____

(6) Casing / Liner

Csng/ Liner	Diameter	From	To	Gauge	Mtrl	Weld	Thrd	Shoe at	Shoe used
C	12.00	0.00	20.00	.250	S	X		20	Out
C	8.00	3.00	137.00	.250	S	X		137	Out

(7) Perforation / Screens
 Perforations:

Mtrl	From	To	Width	Height	#Slots	Dia.	t/pSize	Csng/ Lnr	Method

 Screens:

Mtrl	From	To	S Size	#Slots	Dia.	t/pSize	Type	Gauge

(8) Well Tests (Minimum testing time is one hour)

Type	Yield	Units	Drawdown	Stem at	Duration
A	60.00	G		1450.00	2.00
P	42.00	G	331.00		7.50

Temperature of Water: **64 F**
 Was water analysis done? Depth of artesian flow: _____
 by whom?
 Did any strata contain water unsuitable for use? Too Little Salty
 Muddy Odor Colored other: _____
 Depth of strata: _____

(9) Location of Hole by legal description
 County: **CROO** Latitude: _____ Longitude: _____
 Township: **14.00 S** Range: **16.00 E**
 Section: **29 SENW** Lot: _____ Block: _____
 Tax Lot: **1900** Subdivision: _____
 Street Address of Well (or nearest address):
3150 NE TENNESSE LN PRINEVILLE
 MAP, with location identified, must be attached.

(10) Static Water Level
 Feet below land surface: **74.0** Date: **03 / 17 / 2004**
 Artesian Pressure: _____ Date: _____

(11) Water Bearing Zones
 Depth at which water was first found: **1,380.00 ft.**

From	To	est Flow	swl
1380.00	1450.00	60.00	74

(12) Well Log Ground Elevation: _____

Material	From	To	swl
CLAY SILT SAND BROWN	0.00	23.00	
CLAY STICKY	23.00	28.00	
CLAY SAND BROWN	28.00	58.00	
SILT CLAY GRAY	58.00	100.00	
CLAY STICKY GRAY	100.00	110.00	
CLAYSTONE GRAY	110.00	138.00	
CLAYSTONE GREEN	138.00	185.00	
CLAYSTONE GRAY	185.00	222.00	
SANDSTONE	222.00	230.00	
CLAYSTONE GRAY	230.00	375.00	
SILTSTONE DARK GRAY HARD	375.00	425.00	
LIGHT GRAY SILTSTONE	425.00	475.00	
SANDSTONE GRAY	475.00	525.00	
SILTSTONE GREEN	525.00	605.00	
SILTSTONE GRAY	605.00	615.00	
SANDSTONE BLUE	615.00	730.00	
CLAYSTONE LIGHT GRAY	730.00	780.00	
SILTSTONE DARK GRAY	780.00	790.00	
LAVA BROWN	790.00	812.00	
BASALT GRAY HARD	812.00	830.00	
SILTSTONE GRAY	830.00	845.00	
BASALT GRAY	845.00	885.00	
BASALT RED SEAMS	885.00	918.00	

 Date Started: **02 / 28 / 2004** Date Completed: **03 / 27 / 2004**

(unbonded) Water Well Constructor Certification:
 I certify that the work I perform on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to the best knowledge and belief.
 Signed by: **THOMAS R PECK** WWC #: **758**

(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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed by: **JACK ABBAS** WWC #: **1720**
ABBAS WELL DRILLING CO Phone: **541-548-2787**

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 Special Standards: Depth of completed well: _____
 Explosives Used: Amount: _____ Type: _____
 Hole Seal

Diameter	From	To	Mtrl	From	To	Sacks/lbs

 How was seal placed? _____ Other: _____
 Back fill placed from: _____ Material: _____
 Filter pack from: _____ Size: _____

(6) Casing / Liner
 Casing/ _____ Shoe _____
 Liner Diameter From To Gauge Mtrl Weld Thrd at used

(7) Perforation / Screens
 Perforations: _____ Casing/ _____
 Mtrl From To Width Height #Slots Dia. t/pSize Lnr Method
 Screens: _____
 Mtrl From To S Size #Slots Dia. t/pSize Type Gauge

(8) Well Tests (Minimum testing time is one hour)

Type	Yield	Units	Drawdown	Stem at	Duration

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 Artesian Pressure: _____ Date: _____

(11) Water Bearing Zones
 Depth at which water was first found: _____

From	To	est Flow	swl

(12) Well Log Ground Elevation: _____

Material	From	To	swl
BASALT GRAY	918.00	950.00	
BASALT GRAY BLACK	950.00	1090.00	
BASALT LIGHT GRAY GRAINY	1090.00	1115.00	
BASALT/TUFF LAYERS	1115.00	1200.00	
BASALT CLAY SEAMS GREEN	1200.00	1230.00	
BASALT LIGHT GRAY	1230.00	1280.00	
BASALT FRAC	1280.00	1286.00	
BASALT LIGHT GRAY	1286.00	1330.00	
BASALT BLACK	1330.00	1385.00	
BASALT LIGHT GRAY CLAY SEAMS	1385.00	1452.00	74

 Date Started: _____ Date Completed: _____

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 Signed by: _____ WWC #: _____
 Phone: _____