

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
52331

WELL I.D. # L 64977
START CARD # 155821

(1) LAND OWNER Well Number 1178
Name Gutierrez Cattle Company
Address HC 68 Box 3310
City Post 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 445 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		SOIL	
Diameter	From	To	Material	From	To
18	0	30	Bentonite	0	78
16	30	73	Cement	20	73
8	73	445			

How was seal placed: Method A B C D E
 Other Poured Bentonite 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
12"	+3	73	260	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Liner: _____
Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Artesian
Yield gal/min 1000 Drawdown unknown Drill stem at 445 Time 1 hr.
Temperature of water 72° 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 22 E or W. WM.
Section 7 SW 1/4 NE 1/4
Tax Lot 600 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Pauling Hwy
No street address

(10) STATIC WATER LEVEL:
2 ft. below land surface. Date 5/21/04
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 410

From	To	Estimated Flow Rate	SWL
410	445	1000	2

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Top Soil	0	2	
Hard Brown sand stone	2	30	
& gravel			
Hard green clay stone	30	40	
Hard Brown sand stone	40	50	
& gravel			
Hard green clay stone	50	410	
Hard grey Basalt w	410	445	2
green clay seams			

Date started 5/17/04 Completed 5/21/04

(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 David A Schlichting WWC Number 1583 Date 6/1/04

(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 Danell Magshot WWC Number 584 Date 6-14-04