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 52417

WELL ID # L70599

(START CARD) # 170740

(1) OWNER:

Well Number: 2

Name Ms. Kathy Johnson

Address 955 Combs Flat Rd.

City Prineville State OR Zip 97754

(2) TYPE OF WORK:

[X] New Well [ ] Deepening [ ] Alteration (repair/recondition) [ ] Abandonment

(3) DRILL METHOD:

[ ] Rotary Air [ ] Rotary Mud [X] Cable [ ] Auger

[ ] Other

(4) PROPOSED USE:

[X] Domestic [ ] Community [ ] Industrial [ ] Irrigation

[ ] Thermal [ ] Injection [ ] Livestock [ ] Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval [ ] Yes [X] No Depth of Completed Well 43 ft.

Explosives used [ ] Yes [X] No Type Amount

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
10in	0	20	Bentonite	0	20	15 sacks
6in	20	43				

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E

[X] Other 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:	6in	+1.5	43	.250	[X]	[ ]	[X]	[ ]
					[ ]	[ ]	[ ]	[ ]
					[ ]	[ ]	[ ]	[ ]
					[ ]	[ ]	[ ]	[ ]
Liner:					[ ]	[ ]	[ ]	[ ]
					[ ]	[ ]	[ ]	[ ]

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

[X] Perforations Method Torch

[ ] Screens Type slotted Material pipe

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
30	35	1/4	60	6in	pipe	[X]	[ ]
						[ ]	[ ]
						[ ]	[ ]
						[ ]	[ ]
						[ ]	[ ]

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

[ ] Pump [X] Bailer [ ] Air [ ] Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
35	1	43	1 hr.

Temperature of Water 54 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 15S N or S. Range 16E E or W. of WM.

Section 5 NE 1/4 SE 1/4

Tax lot 300 Lot Block Subdivision

Street Address of Well (or nearest address) Same as above

(10) STATIC WATER LEVEL:

19 ft. below land surface. Date 10/11/04

Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 28

From	To	Estimated Flow Rate	SWL
28	35	50+	19

(12) WELL LOG:

Ground elevation

Material	From	To	SWL
Top Soil	0	6	
Sandy Clay	6	12	
Gravel with some gray & blue clay	12	28	
Gravel WB	28	35	19
Blue & Gray Clay	35	40	19

RECEIVED

DEC 15 2004

WATER RESOURCES DEPT
SALEM, OREGON

Western Water Development
P.O. Box 1670
Redmond, OR 97756

Date started 10/10/04 Completed 10/11/04

(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 my best 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 1385

Signed Robert Buck Date 12/7/04

Robert Buckner

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