CROO 52542

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 2130
WELL I.D. # L LOG Attached
START CARD # OBSERVATION WELL

(1) LAND OWNER
Well Number ____
Name City of Prineville
Address 400 E 3rd Street
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 pump Hoist

(4) PROPOSED USE:
☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☒ Other permit U-370

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☐ No Depth of Completed Well N/A ft.
Explosives used ☐ Yes ☐ No Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
			N/A			

How was seal placed: Method ☐A ☐B ☐C ☐D ☐E
☐ Other ____
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:					☐	☐	☐	☐
					☐	☐	☐	☐
		N/A			☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☐ None
Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS:
☒ Perforations Method Mills Knife
☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
24	28'	1/4x2	56	10"	pipe	☒	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
	N/A		1 hr.

Temperature of water ____ 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 15 N or S Range 16 E or W. WM.
Section 5 SW 1/4 NW 1/4 Oregon t Aspen Add
Tax Lot ____ Lot 9 Block 8 Subdivision ____
Street Address of Well (or nearest address) ____

(10) STATIC WATER LEVEL:
4.5 ft. below land surface. Date ____
Artesian pressure N/A lb. per square inch Date ____

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

From	To	Estimated Flow Rate	SWL
un-known			
See log		CROO 2130	

(12) WELL LOG:
Ground Elevation ____

Material	From	To	SWL
perforated	10" .250 well		
casing with mills-knife			
from 24' to 28'			

RECEIVED
JUN 13 2005
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 5/12/05 Completed 5/12/05

(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 Mark Brooks WWC Number 1371 Date 5/14/05

(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 Mark Brooks WWC Number 1371 Date 5/14/05

ORIGINAL – WATER RESOURCES DEPARTMENT FIRST COPY – CONSTRUCTOR SECOND COPY – CUSTOMER