CROO 53405
05-16-2007

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 90402

START CARD # 1001011

(1) LAND OWNER

Owner Well I.D. 1399

First Name Dennis Last Name Buchanan
Company #2
Address P.O. BOX 40069
City BELLEVUE State WA Zip 98015-4069

(2) TYPE OF WORK

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

(3) DRILL METHOD

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

(4) PROPOSED USE

[ ] Domestic [ ] Irrigation [ ] Community
[ ] Industrial/ Commericial [X] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)
Depth of Completed Well 140.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/ lbs
12	0	18.5	Bentonite	0	18.5	15	S
8	18.5	140					

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[X] Other POURED IN DRY
Backfill placed from ____ ft. to ____ ft. Material ____
Filter pack from ____ ft. to ____ ft. Material ____ Size ____
Explosives used: [ ] Yes Type ____ Amount ____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
(●)	( )	8	[X]	1.5	18.5	.250	(●)	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]

Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s) ____
Temp casing [ ] Yes Dia ____ From ____ To ____

(7) PERFORATIONS/SCREENS

Perforations Method ____
Screens Type ____ Material ____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

( ) Pump ( ) Bailer (●) Air ( ) Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
90		140	1

Temperature 57 °F Lab analysis [ ] Yes By ____
Water quality concerns? [ ] Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Crook Twp 16.00 S N/S Range 24.00 E E/W WM
Sec 4 SW 1/4 of the SW 1/4 Tax Lot 400
Tax Map Number ____ Lot ____
Lat ° ' " or ____ DMS or DD
Long ° ' " or ____ DMS or DD
(●) Street address of well ( ) Nearest address

10809 WOLF CREEK RD
PAULINA, OREGON 97751

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening			[ ]	
Completed Well	05-11-2007		[ ]	75

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 120

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
05-10-2007	120	140	90		[ ]	75
					[ ]	
					[ ]	
					[ ]	
					[ ]	

(11) WELL LOG

Ground Elevation ____

Material	From	To
SANDY TOP SOIL W/ROCK	0	6
GREY SANDSTONE	6	36
BROWN CLAYSTONE	36	72
GREY SANDSTONE	72	84
BROWN CLAYSTONE	84	132
GREY BASALT	132	140

Date Started 05-10-2007 Completed 05-11-2007

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number ____ Date ____
Electronically Filed
Signed ____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 584 Date 05-16-2007
Electronically Filed
Signed DARRELL MAPHET (E-filed)
Contact Info (optional) ____

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

WATER SUPPLY WELL REPORT - continuation page

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05-16-2007

WELL I.D. # L 90402

START CARD # 1001011

(5) BORE HOLE CONSTRUCTION

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/ lbs

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○										

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Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

Water Bearing Zones

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
					☐	
					☐	
					☐	
					☐	
					☐	
					☐	
					☐	
					☐	
					☐	
					☐	

(11) WELL LOG

Material	From	To