

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

06-26-2011

WELL LABEL # L 103113

START CARD # 1013709

(1) LAND OWNER Owner Well I.D. \_\_\_\_\_

First Name \_\_\_\_\_ Last Name \_\_\_\_\_
Company ULUPALAKUA RANCH INC
Address 5455 S CROOKED RIVER HWY
City PRINEVILLE State OR Zip 97754

(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 [X] Irrigation [ ] Community
[ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION Special Standard [ ] (Attach copy)

Depth of Completed Well 70.00 ft.

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, sacks/lbs. Row 1: 12, 0, 26, Granular Bentonite, 0, 26, 28, S.

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

Table with columns: Casing, Liner, Dia, +, From, To, Gauge, Stl, Plstc, Wld, Thrd. Row 1: 8, 2, 26, 250, [X] in Stl, [X] in Wld.

Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 26

Temp casing [ ] Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS

Perforations Method \_\_\_\_\_

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Table with columns: Perf/S, Casing/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 [X] Air [ ] Flowing Artesian

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

Table with 4 columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 200, 100, 1.

Temperature 58 °F Lab analysis [ ] Yes By \_\_\_\_\_

Water quality concerns? [ ] Yes (describe below)

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County Crook Twp 15.00 S N/S Range 16.00 E E/W WM

Sec 19 NW 1/4 of the NW 1/4 Tax Lot 101

Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

[ ] Street address of well [ ] Nearest address

5455 S CROOKED RIVER HWY

(10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)

Table with 4 columns: Existing Well / Predeepening, Completed Well, Date, SWL(psi) + SWL(ft). Row 1: Completed Well, 06-15-2011, 20.

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES

Depth water was first found 45

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row 1: 06-15-2011, 45, 100, 200, 20.

(11) WELL LOG

Ground Elevation \_\_\_\_\_

Table with columns: Material, From, To. Rows include Sand & Gravel, Brown Sand Stone, Hard Grey Basalt, etc.

Date Started 06-06-2011 Completed 06-15-2011

(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.

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.

License Number 1583 Date 06-26-2011

Electronically Filed

Signed DAVID A SCHLICHTING (E-filed)

Contact Info (optional)

(5) BORE HOLE CONSTRUCTION

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

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

(7) PERFORATIONS/SCREENS

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

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

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

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

Comments/Remarks

Caved Back To 70'