

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

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APR 1 1993

Crook 540

16S/17E/33da

(START CARD) # 40726

WATER RESOURCES DEPT
SALEM, OREGON

(1) OWNER:
Name Jasper Knolls Water System
Address 290 Bench Rd.
City Prineville State Or Zip 97754

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 950 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
12"	0	30	cement grout	0	30	24sacks
8"	30	950				

How was seal placed: Method A B C D E
 Other pumped via tremie pipe
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: 8"	+2	30	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 6"	+1	940	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____
(7) PERFORATIONS/SCREENS:
 Perforations Method Factory
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
200	940	1/8	900	6"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min 10gpm Drawdown 145' Drill stem at _____ Time 7 hr.

Temperature of Water 60 Depth Artesian Flow Found 0
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 16S N or S. Range 17E E or W. WM. _____
Section 33 NE 1/4 SE 1/4
Tax Lot 6701 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 290 Bench Rd.
Prineville Or.

(10) STATIC WATER LEVEL:
235 ft. below land surface. Date 3/19/93
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 910'

From	To	Estimated Flow Rate	SWL
910	922	10+ GPM	235

(12) WELL LOG:
Ground elevation _____

Material	From	To	SWL
Top soil	0	1	
Broken lava	1	6	
Red claystone	6	116	
Grey claystone	116	510	
Pink claystone	510	576	
Red claystone	576	696	
Green claystone	696	736	
Red claystone	736	796	
Green claystone	796	810	
Black basalt hard	810	860	
Green claystone	860	905	
Red broken claystone	905	910	235
Green claystone (broken)	910	918	"
Grey claystone hard	918	950	"

Date started 3/4/93 Completed 3/19/93

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed [Signature] WWC Number 1607
Date 3-26-93

(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 well construction standards. This report is true to the best of my knowledge and belief.
Signed [Signature] WWC Number 741
Date 3-26-93