

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

CROO 54589

2/16/2018

WELL I.D. LABEL# L 127081
START CARD # 1037841
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D. STW-2
First Name JIM Last Name NEWTON
Company CITY OF PRINEVILLE
Address 387 NE 3RD ST
City PRINEVILLE State OR Zip 97754

(2) TYPE OF WORK
[ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)
[ ] New Well [ ] Deepening [ ] Conversion

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]
Material From To Amt sacks/lbs
Seal: [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

(3) DRILL METHOD
[ ] Rotary Air [ ] Rotary Mud [x] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE
[ ] Domestic [ ] Irrigation [ ] Community
[ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [x] Other EXPLORATORY

(5) BORE HOLE CONSTRUCTION
Special Standard [ ] (Attach copy)
Depth of Completed Well 40.50 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, lbs. Row 1: 12, 0, 40.5, Bentonite Chips, 0, 18, 27, S. Row 2: Calculated, 14.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[x] Other POURED DRY

Backfill placed from ft. to ft. Material

Filter pack from 18 ft. to 40.5 ft. Material PEA GRAV Size 6/9

Explosives used: [ ] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s)
Temp casing [ ] Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method MACHINE

Table with columns: Perf, Casing, Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size. Row 1: 6, 20.5, 40.5, .125, 3, 456.

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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 20, 20, 2.

Temperature 54 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 115 ppm
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 8 NW 1/4 of the NW 1/4 Tax Lot 201
Tax Map Number Lot
Lat " or 44.28969444 DMS or DD
Long " or -120.84572222 DMS or DD
[ ] Street address of well [x] Nearest address

WEST OF MAIN ST/CROOKED RIVER HWY
CROOKED RIVER PARK (STW-2)

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 12/14/2017 8
Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES
Depth water was first found 10.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
10/31/2017 10 37 20 8

(11) WELL LOG
Ground Elevation 2864.00
Material From To
CLAY BROWN 0 10
GRAVELS SAND BROWN 10 12
GRAVELS SAND SILT GRAY 12 20
LARGE GRAVELS TIGHT 20 22
SILT GRAY SAND 22 35
SAND GRAVELS GRAY SMALL 35 37
CLAY SILT GRAY 37 40.5

Date Started 10/30/2017 Completed 12/14/2017

(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 758 Date 2/16/2018
Signed THOMAS R PECK (E-filed)

(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 1720 Date 2/16/2018
Signed JACK ABBAS (E-filed)
Contact Info (optional)

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

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Map of Hole

