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

**CROO 54790**

**8/8/2019**

**WELL I.D. LABEL# L** 135219
**START CARD #** 1042931
**ORIGINAL LOG #**

## (1) LAND OWNER

Owner Well I.D.
First Name Last Name
Company CITY OF PRINEVILLE C/O TAYLOR NW
Address PO BOX 6714
City BEND State OR Zip 97708

## (2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion ☐ Alteration (complete 2a & 10) ☐ Abandonment(complete 5a)

## (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 ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other

## (4) PROPOSED USE

☐ Domestic ☐ Irrigation ☐ Community ☐ Industrial/ Commericial ☐ Livestock ☐ Dewatering ☐ Thermal ☐ Injection ☒ Other OBSERVATION

## (5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)
Depth of Completed Well 96.00 ft.

BORE HOLE

| Dia | From | To |
|---|---|---|
| 6 | 0 | 96 |
| | | |
| | | |

SEAL

| Material | From | To | Amt | sacks/lbs |
|---|---|---|---|---|
| Bentonite Chips | 0 | 60 | 35 | S |
| | | Calculated | 14 | |
| | | | | |
| | | Calculated | | |

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other POURED DRY
Backfill placed from ft. to ft. Material
Filter pack from 60 ft. to 96 ft. Material SAND Size 10/20
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 |
|---|---|---|---|---|---|---|---|---|---|---|
| ● | ○ | 2 | ☒ | 2 | 60 | .250 | ○ | ● | | ☒ |
| ● | ○ | 2 | | 90 | 96 | .250 | ○ | ● | | ☒ |
| ○ | ○ | | | | | | ○ | ○ | | |
| ○ | ○ | | | | | | ○ | ○ | | |
| ○ | ○ | | | | | | ○ | ○ | | |

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)
Temp casing ☒ Yes Dia 6 From + ☒ 1 To 96

## (7) PERFORATIONS/SCREENS

Perforations Method
Screens Type PREPACK Material PLASTIC

| Perf/ Screen | Casing/ Screen Liner | Dia | From | To | Scrn/slot width | Slot length | # of slots | Tele/ pipe size |
|---|---|---|---|---|---|---|---|---|
| Screen | Casing | 2 | 60 | 90 | .01 | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

○ Pump ○ Bailer ◉ Air ○ Flowing Artesian

| Yield gal/min | Drawdown | Drill stem/Pump depth | Duration (hr) |
|---|---|---|---|
| 10 | | 80 | 1 |
| | | | |
| | | | |

Temperature 56 °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS amount 257 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 SW 1/4 of the NW 1/4 Tax Lot 201
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
○ Street address of well ◉ Nearest address
CROOKED RIVER PARK- S MAIN ST.

## (10) STATIC WATER LEVEL

| | Date | SWL(psi) | + | SWL(ft) |
|---|---|---|---|---|
| Existing Well / Pre-Alteration | | | | |
| Completed Well | 5/20/2019 | | | 5 |

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 12.00

| SWL Date | From | To | Est Flow | SWL(psi) | + | SWL(ft) |
|---|---|---|---|---|---|---|
| 5/17/2019 | 12 | 46 | 20 | | | 10 |
| 5/17/2019 | 58 | 82 | 20 | | | 6 |
| | | | | | | |
| | | | | | | |
| | | | | | | |

## (11) WELL LOG

Ground Elevation

| Material | From | To |
|---|---|---|
| TOP SOIL | 0 | 1 |
| CLAY GRAVELS BROWN | 1 | 10 |
| GRAVELS LARGE GRAY SAND | 10 | 33 |
| SAND GRAY LOOSE | 33 | 46 |
| SAND TIGHT | 46 | 52 |
| CLAY GRAY | 52 | 58 |
| COBBLES SAND | 58 | 82 |
| SILTY CLAY GRAY | 82 | 90 |
| CLAY GREEN | 90 | 96 |

Date Started 5/17/2019 Completed 5/20/2019

**(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 8/8/2019

Signed THOMAS 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 8/8/2019

Signed JACK ABBAS (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 Form Version: