

STATE OF OREGON WATER SUPPLY WELL REPORT

CROO 54792

WELL I.D. LABEL# L

135224

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

8/9/2019

START CARD #

1044259

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 Thrld

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/ Commercial  Livestock  Dewatering

Thermal  Injection  Other MUNICIPAL

(5) BORE HOLE CONSTRUCTION

Special Standard  (Attach copy)

Depth of Completed Well 107.00 ft.

BORE HOLE

Dia From To Material SEAL Amt sacks/lbs

16 0 107 Concrete 0 7 28000 P

Calculated 438

Cement 7 72 70 S

Calculated 50

How was seal placed: Method  A  B  C  D  E

Other \_\_\_\_\_

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from 72 ft. to 100 ft. Material SAND Size 4/10

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 Thrld

8  2 75 .250

8  100 107 .250

Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_

Temp casing  Yes Dia 16 From +  1 To 107

(7) PERFORATIONS/SCREENS

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

Screens Type JOHNSON Material STAINLESS

Perf/ Casing/ Screen Dia From To Scrn/slot Slot # of Tel/

Screen Liner Dia From To width length slots pipe size

Screen Casing 8 75 100 .02 \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_

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

Pump  Bailer  Air  Flowing Artesian

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

100 \_\_\_\_\_ 100 3

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

Water quality concerns?  Yes (describe below) TDS amount 320 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 44.28907000 DMS or DD

Long \_\_\_\_\_ " or -120.84530000 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 7/25/2019 \_\_\_\_\_ 9

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 11.00

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

7/16/2019 11 31 50 \_\_\_\_\_ 6

7/17/2019 72 88 100 \_\_\_\_\_ 9

(11) WELL LOG

Ground Elevation 2857.00

Material From To

CLAY GRAVELS BROWN 0 8

GRAVELS GRAY 8 31

SILT SAND GRAY 31 66

CLAY STREAKS SAND GRAY 66 72

SAND GRAVELS 72 88

CLAY GREEN 88 91

GRAVELS 91 103

CLAY GRAY 103 107

Date Started 7/16/2019 Completed 7/25/2019

(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 8/9/2019

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 8/9/2019

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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8/9/2019

### Map of Hole

<b>STATE OF OREGON WELL LOCATION MAP</b>	<b>Oregon Water Resources Department</b>	
This map is supplemental to the WATER SUPPLY WELL REPORT	725 Summer St NE, Salem OR 97301 (503)988-0900	
<b>LOCATION OF WELL</b>	<b>Well Label: 135224</b>	
Latitude: 44.28907      Datum: WGS84	<b>Printed: August 9, 2019</b>	
Longitude: -120.8453	DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.	
Township/Range/Section/Quarter-Quarter Section:	Provided by well constructor	
WM 6S 2W 34 NWNW		
Address of Well:		
CROOKED RIVER PARK- S MAIN ST		

