					Page 1 of 2
STATE OF OREGON	CROO	54869	WELL I.D. LABEL# I	133398	
WATER SUPPLY WELL REPORT			START CARD #	1044271	
(as required by ORS 537.765 & OAR 690-205-0210)	3/25/2	020	ORIGINAL LOG #		
(1) LAND OWNER Owner Well I.D.					
First Name Last Name		(9) LOCATI	ON OF WELL (legal d	lescription)	
Company CITY OF PRINEVILLE C/O TAYLOR NW			Twp <u>15.00 S N</u>		E E/W WM
Address PO BOX 6714			$\frac{W}{W} = \frac{1/4 \text{ of the } NW}{1/4 \text{ of the } NW}$		
City BEND State OR Zip 97708   (2) TYPE OF WORK X New Well Deepening Conv	I	Fax Map Numbe	r 1/4 01 the	Lot	
(2) TYPE OF WORK New Well Deepening Conv	version	at °	r ' or _44.28680556 ' or120.843833	<u>Lor</u>	DMS or DD
Alteration (complete 2a & 10) Abandonment(co	omplete 5a)	ong °	" or -120 843833	333	DMS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd	1	∩ Stre	et address of well (•) Ne	arest address	
		CROOKED RIV			
Material From To Amt sacks/lbs					
Seal:					
(3) DRILL METHOD		(10) STATIC	C WATER LEVEL		
Rotary Air Rotary Mud Cable Auger Cable Mud		Existing We	Date 11 / Pre-Alteration	SWL(psi) +	- SWL(ft)
Reverse Rotary Other		Completed V			4
(4) PROPOSED USE Domestic Irrigation Community	7		Flowing Artesian?	Dry Hole?	4
Industrial/ Commercial Livestock Dewatering		ATED DEADIN	NG ZONES Depth wa		21.00
Thermal Injection X Other <u>MUNICIPAL</u>	ľ	SWL Date	1		
			From To Est	Flow SWL(psi)	+ SWL(II)
(5) BORE HOLE CONSTRUCTION Special Standard (A	Attach copy)	5/14/2019	21 90	50	4
Depth of Completed Well <u>95.00</u> ft.					
BORE HOLE SEAL Dia From To Material From To A	sacks/ Amt lbs				
	40 S				
	12				
	42 S	11) WELL L	00		
	20		Ground Elevatio	n <u>2874.00</u>	
How was seal placed: Method $\square A \square B \boxtimes C \square D$			Material	From	То
X Other POURED DRY		CLAY SAND B		0 4	4
Backfill placed from ft. to ft. Material		<u>COBBLES CLA</u> SAND SILT FIN		21	21 26
Filter pack from <u>48</u> ft. to <u>95</u> ft. Material <u>SAND</u> Size <u>1</u>	10/20		LAYERS COARSE	26	90
Explosives used: Yes Type Amount		CLAY PACK SA		90	95
(5a) ABANDONMENT USING UNHYDRATED BENTONI	ТЕ				
Proposed Amount Actual Amount	I⊢				
(6) CASING/LINER					
Casing Liner Dia + From To Gauge Stl Plstc					
$ \bigcirc \bigcirc 8 \\ \hline \bigcirc 2 \\ \hline \hline \bigcirc 2 \\ \hline \bigcirc 2 \\ \hline \hline \bigcirc 2 \\ \hline \hline$					
	$\vdash$ $\vdash$ $\vdash$				
	┝┥┝┥╟				
Shoe Inside Outside Other Location of shoe(s)					
Temp casing Yes Dia $16$ From $+$ X 1 To $95$					
(7) <b>PERFORATIONS/SCREENS</b> $10^{-10}$ $10^{-10}$ $10^{-10}$ $10^{-95}$					
Perforations Method	IL				
Screens Type JOHNSON Material STAINLE	ESS	Date Started 5	/15/2019 Com	pleted _5/21/2019	
Perf/ Casing/ Screen Scrn/slot Slot # of	Tele/				
		(	ter Well Constructor Certifice work I performed on the co		ing alteration on
Screen Casing 8 50 90 .01			f this well is in compliance		
			ndards. Materials used and in		
	1	the best of my ki	nowledge and belief.		
	]	License Number	_758 D	ate 3/25/2020	
(8) WELL TESTS: Minimum testing time is 1 hour		<b>C</b> : 1			
Pump ( Bailer Air Flowing A	Artesian	Signed THOM	MAS PECK (E-filed)		
		(bonded) Water Well Constructor Certification			
50 0 1		I accept respons	ibility for the construction, d	eepening, alteration	n, or abandonment
			on this well during the constru		
			g this time is in compliance		
Temperature <u>58</u> °F Lab analysis Yes By			dards. This report is true to the	-	ledge and belief.
Water quality concerns? Yes (describe below) TDS amount <u>261</u> From To Description Amount	ppm 1 Units	License Number <u>1720</u> Date <u>3/25/2020</u>			
Trom To Description Allount		Signed JACK	ABBAS (E-filed)		
		• •	tional)		
		(op			

ORIGINAL - WATER RESOURCES DEPARTMENT THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow **CROO 54869** 

3/25/2020

Map of Hole

## STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

## LOCATION OF WELL

Latitude: 44.286805556 Datum: WGS84 Longitude: -120.843833333 Township/Range/Section/Quarter-Quarter Section: WM15.00S16.00E8SWNW Address of Well: CROOKED RIVER PARK

## Oregon Water Resources Department 725 Summer St NE, Salem OR 97301



## Well Label: 133398 Printed: March 25, 2020

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.

Provided by well constructor

