Amended 8/10/2022

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

CROO 55149

11/30/2021

WELL I.D. LABEL# L 142156
START CARD # 1054228
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name JIMMY Last Name FEWELL
Company
Address 5242 NE MILL CREEK RD
City PRINEVILLE State OR Zip 97754

(2) TYPE OF WORK

[X] 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 [X] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE

[X] Domestic [ ] Irrigation [ ] Community
[ ] Industrial/ Commericial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)
Depth of Completed Well 75.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs
12	0	20	Bentonite	0	20	17	S
6	20	75			Calculated	16.08	
					Calculated		

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[X] Other POURED DRY
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
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
(•)	( )	6	[X]	1	60	.250	(•)	( )	[X]	[ ]
( )	(•)	4	[ ]	15	75	.160	( )	(•)	[X]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]

Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 75'
Temp casing [ ] Yes Dia From + [ ] To

(7) PERFORATIONS/SCREENS

Perforations Method torch cut
Screens Type Material

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Casing	6	65	75	.125	4	30	6
Perf	Liner	4	55	75	.125	4	30	4

(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	0	50	1

Temperature 57 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 318 mg/L

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County CROOK Twp 14.00 S N/S Range 16.00 E E/W WM
Sec 30 NE 1/4 of the NE 1/4 Tax Lot 3516
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
( ) Street address of well (•) Nearest address
CORNER OF MAIN ST. AND WEST HILLS LOOP.

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration			[ ]	
Completed Well	11/12/2021		[ ]	30

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 38.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
11/15/2021	38	75	10		[ ]	30
					[ ]	
					[ ]	
					[ ]	
					[ ]	

(11) WELL LOG

Ground Elevation

Material	From	To
top soil	0	5
fine black sand/ brown sand	5	15
course black sand	15	20
course black sand/ gravel	20	30
course black sand/ course gravel	30	75

Date Started 10/10/2021 Completed 11/12/2021

(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 Date

Signed

(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 2057 Date 11/30/2021

Signed RENA WILLIAMS (E-filed)

Contact Info (optional)