

STATE OF OREGON WATER SUPPLY WELL REPORT

OCT 04 2000

WELL I.D. # L 25224

START CARD # 111534

Instructions for completing this report are on the last page of this form.

WATER RESOURCES DEPT. SALEM, OREGON 3-15-29 SW SW

(1) OWNER: Name Scott McKenric Well Number 620

Address PO Box 281 City Sixes State OR Zip 97476

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration [] Abandonment

(3) DRILL METHOD: [] Rotary Air [X] Rotary Mud [] Cable [] Auger [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 83 ft.

HOLE SEAL table with columns for Diameter, From, To, Material, Sacks or pounds

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other Poured from surface

Backfill placed from 35 ft. to 83 ft. Material 6/9

(6) CASING/LINER table with columns for Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: [] Perforations [X] Screens Method Attached to Casing

Table for perforations/screens with columns for From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Table for well tests with columns for Pump/Bailer/Air/Artesian, Yield, Drawdown, Drill stem at, Time

Temperature of water 53° Depth Artesian Flow Found Was a water analysis done?

(9) LOCATION OF WELL by legal description: County Curry Latitude Longitude Township 31 N or S Range 15 E or W.M. Section 29 SW 1/4 SW 1/4

(10) STATIC WATER LEVEL: 4' 9" ft. below land surface. Date 12/19/99

(11) WATER BEARING ZONES: Depth at which water was first found 10'

Table for water bearing zones with columns for From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation +/- 300'

Table for well log with columns for Material, From, To, SWL

Date started 12/19/98 Completed 2/15/99

(bonded) Water Well Constructor Certification: I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards.

Signed Brandon Well + Septic Co. Inc Date WWC Number

(bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above.

Signed Jim Mack Sr. Mowc Date 2/16/99 WWC Number 1493

CURR
50457

FEB 17 1999

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

WATER RESOURCES DEPT.
SALEM, OREGON

31-15-29
WELL I.D. # L 25224
START CARD # 111534

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number 620
Name Scott McKenric

Address PO Box 281
City Sixes State OR Zip 97426

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 83 1/2 ft.
Explosives used Yes No Type TOC Amount TOC

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12 1/4"	0	83	Bentonite	0	35	46 SX
6"	83	90				

How was seal placed: Method A B C D E
 Other Poured From surface

Backfill placed from 35 ft. to 83 ft. Material 6/9

Diameter	From	To	Gauge	Steel			
				Plastic	Welded	Threaded	
8"	+1	63'7"	160*	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	73'7"	83'1"	160*	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
(Tail Pipe)							
10"	+1'4"	3'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
(Protective Casing)							

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:
 Perforations Method Attached to Casing
 Screens Type Johnson V-wire Material 5.5

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
63'7"	73'7"	.070		8"	Pipe	<input type="checkbox"/>	<input type="checkbox"/>

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

<input checked="" type="checkbox"/> Pump	<input type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing Artesian
Yield gal/min	Drawdown	Drill stem at	Time
846 gpm	21'	75	1 hr.
846 gpm	21'	75	2 hr.

Temperature of water 53° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Curry Latitude _____ Longitude _____
Township 31 N or S Range 15 E or W. WM. 0
Section 29 SW 1/4 SW 1/4
Tax Lot 4100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) N. of Airport Rd. Sixes

(10) STATIC WATER LEVEL:
4' 9" ft. below land surface. Date 12/19/99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 10'

From	To	Estimated Flow Rate	SWL
10	81	+/- 275	49"
Specific Cap 4.0 gal / Ft of DD			

(12) WELL LOG:
Ground Elevation +1-300'

Material	From	To	SWL
Wood w/ Clay Brown	0	2	
Sandy Clay Tan	2	8	
Sandy Clay tan w/ Gravel	8	10	
Sand Fine-med Brn	10	17	4'9"
Sandy Clay tan w/ Gravel	17	20	
Fine-med			
Gravel Fine-med w/ sand	20	30	
Fine-CRS Gray Brown			
Sand Fine-CRS Brown	30	54	
Wood w/ sand + Gravel	54	59	
Shell w/ Gravel Fine-med	59	75	
+ CRS sand-Fine Gray			
Sandy Clay Gray w/	75	81	
interbed shell + Gravel			
Claystone w/ Sandstone	81	90	
lenses Gray			

Date started 12/19/99 Completed 2/15/99

(bonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, 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.

WWC Number _____
Signed Bendon Well + Septic Co Inc Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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.

WWC Number 1493
Signed Jim Mack Sr. MGC Date 2/16/99