

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

*Desc*  
 1197

RECEIVED

MAR - 5 1992

145/11E/33ad

WATER RESOURCES DEPT.

(START CARD) # 37113 labeled

**(1) OWNER:** Well Number \_\_\_\_\_  
 Name Tom Coffield  
 Address Black Butte Ranch  
 City Sisters State Ore Zip 97759

**(2) TYPE OF WORK:**  
 New Well  Deepen  Recondition  Abandon

**(3) DRILL METHOD:**  
 Rotary Air  Rotary Mud  Cable  
 Other \_\_\_\_\_

**(4) PROPOSED USE:**  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION:**  
 Special Construction approval  Yes  No Depth of Completed Well 270 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	35	cement	35	0	22 sacks
8"	35	270				

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

**(6) CASING/LINER:**

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing 8"	+1	35	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 6"	0	270	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_  
**(7) PERFORATIONS/SCREENS:**  
 Perforations Method machine  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
250	270	1/8 by 3	28			<input type="checkbox"/>	<input checked="" type="checkbox"/>

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailor  Air  Flowing Artesian  

Yield gal/min	Drawdown	Drill stem at	Time
20 +		270	1 hr.

Temperature of Water 52 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 Des Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 14 S N or S, Range 11 E E or W, WM. \_\_\_\_\_  
 Section 33 A SE 1/4 NE 1/4 \_\_\_\_\_  
 Tax Lot 1200 Lot 3 Block 2 Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) \_\_\_\_\_  
18365 Fryrear Ranch Rd Bend, Ore

**(10) STATIC WATER LEVEL:**  
220 ft. below land surface. Date 2-4-92  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**  
 Depth at which water was first found 220

From	To	Estimated Flow Rate	SWL
220	238		220
247	270		

**(12) WELL LOG:** Ground elevation \_\_\_\_\_

Material	From	To	SWL
brn soil	0	2	
brn congl	2	7	
gray congl	7	26	
gray basalt	26	63	
brn ss	63	109	
brn ss congl med	109	146	
brn basalt	146	165	
brn cindery congl	165	173	
brn ss congl	173	190	
brn basalt	190	211	
gray basalt	211	220	
brn vesicular basalt (WB)	220	238	
gray basalt	238	247	
gray cinder gravel (WB)	247	270	

Date started 1-30-92 Completed 2-4-92

**(unbonded) 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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed Larry H. Allen WWC Number 1317  
 Date 2-15-92

**(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 well construction standards. This report is true to the best of my knowledge and belief.

Signed John V. Johnson WWC Number 595  
 Date 2-15-92