NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the
STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

RECEIVED MAR 19 1975 STATE ENGINEER SALEM, OREGON

RECEIVED JAN 20 1975 STATE ENGINEER SALEM, OREGON

DES 2968

WATER WELL REPORT

STATE OF OREGON (Please type or print) (Do not write above this line)

State Well No. 15S/10E-3 6

State Permit No. 29768

(1) OWNER:
Name BROOKS RESOURCES
Address P.O. BOX 217 SISTERS, ORE.

(2) TYPE OF WORK (check):
New Well [X] Deepening [ ] Reconditioning [ ] Abandon [ ]
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:
Rotary [X] Driven [ ]
Cable [ ] Jetted [ ]
Dug [ ] Bored [ ]

(4) PROPOSED USE (check):
Domestic [ ] Industrial [X] Municipal [ ]
Irrigation [ ] Test Well [ ] Other [ ]

CASING INSTALLED:
Threaded [ ] Welded [ ]
6" Diam. from 0 ft. to 20 ft. Gage .250
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

PERFORATIONS:
Perforated? [ ] Yes [X] No.
Type of perforator used
Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:
Well screen installed? [ ] Yes [X] No
Manufacturer's Name
Type Model No.
Diam. Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:
Drawdown is amount water level is lowered below static level
Was a pump test made? [ ] Yes [X] No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
" " " "
" " " "
Bailer test 10 gal./min. with 0 ft. drawdown after 2 hrs.
Artesian flow g.p.m.
Temperature of water 52 Depth artesian flow encountered ft.

(9) CONSTRUCTION:
Well seal—Material used CEMENT
Well sealed from land surface to 20 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in.
Number of sacks of cement used in well seal 3 sacks
Number of sacks of bentonite used in well seal sacks
Brand name of bentonite
Number of pounds of bentonite per 100 gallons of water lbs./100 gals.
Was a drive shoe used? [ ] Yes [X] No Plugs Size: location ft.
Did any strata contain unusable water? [ ] Yes [X] No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? [ ] Yes [X] No Size of gravel:
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:
County Deschutes Driller's well number
NW ¼ ¼ Section 3 T. 15S R. 10E W.M.
Bearing and distance from section or subdivision corner
THE BEECHY PLACE Lot ± 8

(11) WATER LEVEL: Completed well.
Depth at which water was first found 185 ft.
Static level 185 ft. below land surface. Date 12/10/74
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:
Diameter of well below casing 6
Depth drilled 210 ft. Depth of completed well 210 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. *Report each change in position of Static Water Level and indicate principal water-bearing strata.*

MATERIAL	From	To	SWL
OVER BURDEN	0	10	
LAVA	10	45	
BOLD & CONG	45	123	
BASALT	123	150	
SANDSTONE	150	185	
SAND BLACK WATER BEARING	185	210	

Work started 12/9/74 19 Completed 12/10/74 19
Date well drilling machine moved off of well 12/11/74 19

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] R M Bowen (Drilling Machine Operator) Date 1/2/75 19
Drilling Machine Operator's License No. 487

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name McCoy & Son Well Drilling Co. (Person, firm or corporation) (Type or print)
Address Rt 2, Box 1167 Bend, Ore.
[Signed] Bob McCoy (Water Well Contractor)
Contractor's License No. 480 Date 1/15, 1975

(USE ADDITIONAL SHEETS IF NECESSARY) 544

SP*45656-119

DESC 2968

WELL IDENTIFICATION FORM

Owner's Well Number: _____

Century 21 Kathleen Baehse

CURRENT WELL OWNER: Phone 1-800-535-4322

Name: BROOKS Resources Richard Jok

Mailing Address: PO Box 217 69050 Barclay Pl

City: Sisters State: OR Zip: 97759

If a well report is available for this well, please attach a copy of it to this form and return. It is not necessary for you to complete the remainder of the form if the well report is attached. If a well report is not available, please complete the remainder of the form to the best of your ability.

WELL LOCATION:

Desc 2968

County: Desc # 2968 Latitude: _____ Longitude: _____

Township: 15 N or S Range: 10 E or W Section: 3 _____ 1/4 _____ 1/4

Tax Lot Number: Lot 8 BARclay Place

Street Address of Well (if different from above): 69050 Barclay Place

Sisters 97759

WELL INFORMATION:

Start Card Number: _____ Approx. Construction Date: _____

Well Constructor: _____

Name of Owner at Time of Construction: _____

Well Depth (in feet): _____ Static Water Level (in feet): _____

Diameter of Exposed Well Casing (in inches): _____

Does this well have a formal water right associated with it? Yes: _____ No: _____ If yes:

Application #: _____ Permit #: _____ Certificate #: _____

Please Return Completed Form to: **Oregon Water Resources Department**
158 12th Street NE
Salem, OR 97310

(Office use only)

Well Identification Number: L0000512