

STATE OF OREGON  
**WATER WELL REPORT**  
 (as required by ORS 537.165)

DESC 3577 **RECEIVED**  
 FEB 13 1990

15S/12E/14ab  
 (START CARD) # 17170

(1) **OWNER:**  
 Name Eagle Crest Partners Ltd.  
 Address P.O. Box 1215  
 City Redmond State OR Zip 97756

(9) **LOCATION OF WELL by legal description:**  
 County Desch. Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 15S Nor S, Range 12E E or W, WM.  
 Section 14 NW  $\frac{1}{4}$  NE  $\frac{1}{4}$   
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) Eagle crest Resort  
1522 Clinefalls Rd.-Redmond, OR 97756

(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 283 ft.  
 Explosives used  Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
	ORIGINAL	NO DRILLING	DONE	

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	10	0	225'8"	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) **PERFORATIONS/SCREENS:**  
 Perforations Method original screen  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
600	39	24	1 hr.

Pump  Bailor  Air  Flowing Artesian

Temperature of water N/A Depth Artesian Flow Found \_\_\_\_\_  
 Was a water analysis done?  Yes By whom NO  
 Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
 Depth of strata: \_\_\_\_\_

(10) **STATIC WATER LEVEL:**  
224 ft. below land surface. Date 1-10-90  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) **WATER BEARING ZONES:**

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL

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

Material	From	To	SWL
WE INSTALLED A 10" LINER TO ACT AS AN EXTENDED RISER PIPE ON TOP OF SCREEN. RISER PIPE IS ATTACHED TO SCREEN BY CENTERING A 10 1/8" O.D. NIPPLE INSIDE SCREEN AND RESTING LINER ON TOP OF SCREEN. SEE ATTACHED DIAGRAM FOR SPECIFIC DETAILS. WELL SCREEN WAS CLEANED OUT TO ORIGINAL DEPTH OF 282' 8".			

Date started 1-9-90 Completed 1-10-90

(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 Steven M. Stadel WWC Number 688  
 Date 2-8-90

(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 [Signature] WWC Number 723  
 Date 2-8-90