STATE OF OREGON WATER WELL REPORT DESC 35

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(as required by ORS 537.765)) SLF 1 0 1989 (START CARD) # 8050
(1) OWNER: Well Number:	(9) LOCATION OF WELL by legal description:
Name Eagle Crest Resort	County Desch Latitude Longitude Township 15S Nor S, Range 12E E or W, WM. Section 14 SW 4 SE 4
Address 1522 Cline Falls Rd.	Township 15S Nor S, Range 12E E or W, WM.
City Redmond State OR Zip 97756	_ Section14SW14SE14
(2) TYPE OF WORK:	Tax Lot Lot Block Subdivision
☐ New Well ☐ Deepen ☐ Recondition ☐ Abandon	Street Address of Well (or nearest address)
(3) DRILL METHOD	
☐ Rotary Air ☐ Rotary Mud ☐ Cable	(10) STATIC WATER LEVEL:
Other	= ft. below land surface. Date
(4) PROPOSED USE:	Artesian pressure lb. per square inch. Date
☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation	(11) WATER BEARING ZONES:
Thermal Injection Other	Depth at which water was first found
(5) BORE HOLE CONSTRUCTION: Special Construction approval Yes No Depth of Completed Well	
Special Construction approval Yes No Depth of Completed Well	ft. From To Estimated Flow Rate SWL
Explosives used	_
HOLE SEAL Amount	
Diameter From To Material From To sacks or pounds	3
-	(12) WELL LOG:
	Ground elevation Material From To SWI.
	Material From To SWL well screen had sagged to
How was seal placed: Method	-228. Screen is now from
☐ Other	- 228 to -283. Well was
Backfill placed fromft. toft. Material	- bailed out to a depth of -256
Gravel placed from ft. to ft. Size of gravel	
(6) CASING/LINER:	
Diameter From To Gauge Steel Plastic Welded Threader	
Liner: 12" 227 235 .188 \(\)	
Final location of shoe(s)	
(7) PERFORATIONS/SCREENS:	
Perforations Method	_
Screens Type Material	- -
Slot Tele/pipe From To size Number Diameter size Casing Liner	
	Date started 8-14-89 Completed 8-16-89
(e) WELL DECORD AS:	(unbonded) Water Well Constructor Certification:
(8) WELL TESTS: Minimum testing time is 1 hour	I certify that the work I performed on the construction, alteration, or
☐ Pump ☐ Bailer ☐ Air ☐ Artesian	abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my besi
Yield gal/min Drawdown Drill stem at Time	knowledge and belief.
1 hr.	WWC Number
	Signed Date
	(bonded) Water Well Constructor Certification:
Temperature of water Depth Artesian Flow Found	I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. all
Was a water analysis done?	- work performed during this time is in compliance with Oregon well
Did any strata contain water not suitable for intended use? ☐ Too little ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other	construction standards. This report is true to the best of my knowledge and
Depth of strata:	WWC Number <u>5/U</u>
	Signed Date