

(1) OWNER: Well Number: #5
 Name **City of Redmond**
 Address **P.O. Box 726**
 City **Redmond** State **OR** Zip **97756**

(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 **802** ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
26"	0	802	Cement	0	100	297 Sacks
26"	0	802	Cement	370	400	66 sacks

How was seal placed: Method A B C D E
 Other
 Backfill placed from **100** ft. to **375** ft. Material **Bentonite**
 Gravel placed from **400** ft. to **802** ft. Size of gravel **#6 SilicaRes**

(6) CASING/LINER:

Casing:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	16"	+2	507	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	16"	547	567	.375	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	16"	797	802	.375	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Liner: _____
 Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type **Stainless** Material **316L**

From	To	Slot size	Number	Tele/pipe Diameter	Tele/pipe size	Casing	Liner
507	547	.080		16"	Pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
567	797	.080		16"	Pipe	<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min **2300** Drawdown **2.5'** Drill stem at **360** Time **24 hr.**

Temperature of Water **57** Depth Artesian Flow found _____
 Was a water analysis done? Yes By whom **Coffee Labs**
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: **208**

(9) LOCATION OF WELL by legal description:
 County **Deschutes** Latitude _____ Longitude _____
 Township **15S** N or S. Range **13E** E or W. of WM.
 Section **20AA** NE $\frac{1}{4}$ NE $\frac{1}{4}$
 Tax Lot **2900** Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) **19th & Quartz Ave.**

(10) STATIC WATER LEVEL:
259 ft. below land surface. Date **3/23/98**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found **208**

From	To	Estimated Flow Rate	SWL
208	209	30+	208
275	405	1000	208
536	802	9000	259

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Gray Basalt	0	39	
Red & Black Cinders	39	40	
Brown Ash & Cinders	40	45	
Brown Basalt	45	48	
Gray Basalt	48	54	
Brown Ash	54	55	
Gray Basalt	55	81.5	
Gray Tuff	81.5	86	
Hard Gray Basalt	86	101.5	
Gray Volcanic Conglomerate	101.5	124	
Brown Ash Conglomerate	124	125	
Fracture Lost Cuttings (Grouted)	125	131	
Brown Conglomerate	131	136	
Brown & Gray Lava with Ash	136	157	
Gray Basalt & Ash	157	159	
Red Ash (Soft)	159	161	
Brown & Gray Basalt & Ash	161	167	
Hard Gray & Brown Basalt	167	172	
Soft Brown Ash	172	174	
Gray Basalt Medium Hard	174	177	
Brown & Gray Basalt with Brown Ash	177	184	
Brown & Gray Basalt with Gray Ash	184	190	
Redish Brown Ash with Broken Basalt	190	204	
Brown Lava with Ash	204	208	

Continued on next page
 Date started **8/29/97** Completed **3/23/95**

(unbonded) Water Well Constructor Certification:
 I certify that the work 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 my best knowledge and belief.
 JUL 1 1998
 Signed _____ WWC Number _____
 Date **WATER RESOURCES DEPT. SALEM, OREGON**

(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.
 Signed **Robert Buck** WWC Number **1385**
 Date **4-27-98**
Western Water Development Corporation

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

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

MAY 5 1998

desc 51647

WELL ID #

(START CARD) # 101989

Page 2 of 3

(1) OWNER:

Well Number:

Name City of Redmond

Address

City State Zip

(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 ft. Explosives used Yes No Type Amount

Table with columns for HOLE Diameter, From, To, Material, SEAL From, To, Amount sacks or pounds

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:

Table with columns for Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded for Casing and Liner

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Table with columns for Perforations/Screen Method, Type, Material, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Pump Bailer Air Flowing Artesian

Table with columns for Yield gal/min, Drawdown, Drill stem at, Time

Temperature of Water 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 Latitude Longitude Township 15S N or S. Range 13E E or W. of WM. Section 20AA Tax Lot Lot Block Subdivision Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:

ft. below land surface. Date Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found

Table with columns for From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Ground elevation

Table with columns for Material, From, To, SWL. Includes entries like Red Cinders WB (sealed off), Brown Lava with Ash, etc.

Continued on next page

Date started 8-21-97 Completed 3-23-98

(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 water supply well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed JUL 1 1998 WWC Number 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.

Signed WWC Number 1385 Date

Western Water Development Corporation

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

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

MAY 6 1998

class
51647

WELL ID # _____
(START CARD) # **101989**
Page 3 of 3

(1) OWNER: Well Number: _____
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Address _____
City _____ State _____ Zip _____

(2) TYPE OF WORK:
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(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 _____ ft.
Explosives used Yes No Type _____ Amount _____
HOLE SEAL
Diameter From To Material From To Amount
Diameter From To Material From To sacks or pounds
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:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

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

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____
Temperature of Water _____ 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 _____ Latitude _____ Longitude _____
Township **15S** N or S. Range **13E** E or W. of WM.
Section **20AA** 1/4 _____ 1/4 _____
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
ft. below land surface. _____ Date _____
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
Gray Broken Lava Hard WB	714	738	259
Brown Vesicular Lava Pinholes WB	738	765	259
Brown & Gray Lava WB	765	783	259
Soft Brown Conglomerate WB	783	802	259

RECEIVED
JUL - 1 1998
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 8-21-97 Completed 3-23-98

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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 my best knowledge and belief.
Signed _____ WWC Number _____
Date _____

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Signed _____ WWC Number **1385**
Date _____
Western Water Development Corporation