

## WATER SUPPLY WELL REPORT

DESC 52769

Received Date **12/14/1999**Well ID Tag # **L 30806**Start Card # **121645**

(as required by ORS 537.765)

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

**(1) OWNER**

Well Number

Name **BRAD SKELTON**Street **8901 NE 9TH**City **TERREBONNE**State **OR** Zip **97760****(2) TYPE OF WORK**

- ☒ New ☐ Alter (Recondition) ☐ Alter (Repair)  
☐ Deepening ☐ Abandonment

**(3) DRILL METHOD**

- ☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger

Other

**(4) PROPOSED USE**

- ☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation ☐ Injection  
☐ Livestock ☐ Thermal Other

**(5) BORE HOLE CONSTRUCTION**Special Standards ☐ Depth of completed well **172** ft.Explosives Used ☐ Amount Type

| Diameter | From  | To  | Material  | Begin Depth | End Depth | Material Amount | Units |
|----------|-------|-----|-----------|-------------|-----------|-----------------|-------|
| 12.00    | 0.00  | 18  |           |             |           |                 |       |
| 8.00     | 18.00 | 172 | Bentonite | 0.00        | 18.00     | 11.00           | B     |

How as seal placed: Method Other **POURED DRY**

Backfill placed from ft. TO ft. Material

Filter pack from ft. TO ft. Size in.

**(6) CASING/LINER**

| Casing or Liner | Diameter | Begin Depth | End Depth | Gauge | Material | Weld | Threaded | Location Of Shoe |
|-----------------|----------|-------------|-----------|-------|----------|------|----------|------------------|
| C               | 8.00     | 2.00        | 18.00     | .250  | S        |      |          |                  |

**(7) PERFORATION/SCREENS**

- ☐ Perforation: Method  
☐ Screens Type Material

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

Type Yield Units Drawdown Stem at Duration  
**Air** **50.0** **G** **160** **1.0**

Temperature of water **54** °F/C Depth artesian flow found ft.Was water analysis done? ☐

By Whom?

Did any strata contain water not suitable for intended use? ☐ Too Little ☐ Salty☐ Muddy ☐ Odor ☐ Colored Other

Depth of strata ft.

**(9) LOCATION OF HOLE By legal description**County **Deschutes** Latitude LongitudeTownship **14.00 S** Range **13.00 E** SubdivisionTax lot **1400** Lot BlockSection **15 SE 1/4 NW 1/4**

Street Address of Well (or nearest address)

**LOT 6 BLOCK 2 HARRIS ESTATES PHASE 1**  
**MAP with location indentified must be attached**

**(10) STATIC WATER LEVEL****120.0** Ft. below land surface. Date **12/07/1999**

Artesian Pressure lb/sq. in. Date

**(11) WATER BEARING ZONES**Depth at which water was first found **145** ft.

| From | To  | Est. Flow Rate | SWL |
|------|-----|----------------|-----|
| 145  | 165 | 50             | 120 |

**(12) WELL LOG**

Ground Elevation ft.

| Material               | From | To  | SWL |
|------------------------|------|-----|-----|
| LAVA BROKEN CLAY BROWN | 0    | 3   |     |
| LAVA GRAY              | 3    | 25  |     |
| LAVA RED/GRAY          | 25   | 41  |     |
| LAVA GRAY              | 41   | 140 |     |
| BASALT CLAY SEAMS      | 140  | 164 | 120 |
| LAVA GRAY              | 164  | 172 |     |

Date started **12/07/1999**Completed **12/07/1999**

(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 the best knowledge and belief.

Signed By **JACK ABBAS**(bonded) Water Well Constructor Certification: WWC Number **1720**

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.

WWC Number **758**Signed By **THOMAS R PECK****D-3 WELL DRILLING**