

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

DESC. 52803

JAN 10 2000

WELL I.D. # L 38108
START CARD # 127859

WATER RESOURCES DEPT.
SALEM, OREGON

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

(1) OWNER: Well Number _____
Name Pat Warner
Address P.O. Box 402
City Sisters State Ore. Zip 97759

(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 420 ft.
Explosives used Yes No Type _____ Amount _____

HOLE SEAL

| Diameter | From | To | Material | From | To | Sacks or pounds |
|----------|--------|--------|-----------|------|--------|-----------------|
| 12 | 0 | 35 1/2 | Bentonite | 0 | 35 1/2 | 19 |
| 8 | 35 1/2 | 420 | | | | |

How was seal placed: Method A B C D E
 Other Found in Dry
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: 8 | +15 | 35 1/2 | 250 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner: 6 | -20 | 420 | 188 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method Factory
 Screens Type _____ Material _____

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|-----|-----------|--------|----------|----------------|--------------------------|-------------------------------------|
| 380 | 420 | 1/16 | 4 | 4 5/8 | 6 | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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

| Yield gal/min | Drawdown | Drill stem at | Flowing Time |
|---------------|----------|---------------|--------------|
| 50+ | 0 | 415 | 1 hr |

Pump Bailer Air Artesian

Temperature of water 49° 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 Deschutes Latitude _____ Longitude _____
Township 16 N or S Range 11 E or W. WM.
Section 7 SE 1/4 NE 1/4
Tax Lot 300 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 66280 Jericho Bend, Ore.

(10) STATIC WATER LEVEL:
323 ft. below land surface. Date 1-5-00
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 359

| From | To | Estimated Flow Rate | SWL |
|------|-----|---------------------|-----|
| 359 | 420 | 50+ | 323 |

(12) WELL LOG:
Ground Elevation _____

| Material | From | To | SWL |
|---------------------|------|-----|-----|
| Top soil | 0 | 1 | |
| Course Gravel | 1 | 4 | |
| SAND + Gravel | 4 | 30 | |
| Brown SANDSTONE | 30 | 109 | |
| Brown Clay Concl. | 109 | 201 | |
| Brown SANDSTONE | 201 | 261 | |
| Brown Clay Stone | 261 | 359 | 323 |
| W.B. Brocken Basalt | 359 | 420 | |

Date started 1-4-00 Completed 1-5-00

(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 the best of my knowledge and belief.

Signed Jeff Pardoll WWC Number _____ Date 1-5-00

(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 Doug Selim WWC Number 1255 Date 1-5-00