

DESC  
52940

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

40881  
WELL I.D. # L 30911  
START CARD # W126274

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

(1) OWNER: Well Number \_\_\_\_\_  
Name GORDON WANER  
Address P.O. BOX 1098  
City LA PINE State OR Zip 97739

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10	0	18	Hole plug	0	18	400 LBS
6	18	35				

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: 6	1	30	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 5	(15) 25	35	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Casing	Liner
15	35	020	1300	5		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing  Artesian  
Yield gal/min 15 Drawdown 6 Drill stem at 144 Hz Time  
Temperature of water 43 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 NO  
Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County DESCHUTES Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 21 N or S Range 10 E or W. WM.  
Section 36 DC SE 1/4 SW 1/4  
Tax Lot 600 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 17071 ROSLAND RD  
LA PINE, OR. 97739

(10) STATIC WATER LEVEL:  
12 ft. below land surface. Date 4-10-00  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 12

From	To	Estimated Flow Rate	SWL
12	35	12-15	12

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Pumice soil	0	4	12
Sand clay	4	12	
Brown sand	12	35	

RECEIVED

AUG 18 2000

WATER RESOURCES DEPT.  
SALEM, OREGON

RECEIVED

APR 24 2000

WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 4-10-00 Completed 4-10-00

(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.

WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ 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.

WWC Number 1559  
Signed \_\_\_\_\_ Date 4-15-00