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DESC 53745 **DESC 53745**

STATE OF OREGONAR 2 9 2001 WATER SUPPLY WELL REPORT

(as required by ONVATER) RESOURCES DEBT. page of this form. Instructions for complemental page of this form.	START CARD# _/S // / ·
*** ** ** *	(9) LOCATION OF WELL by legal description:
	County カッング Latitude Longitude
lame George Bors	Township / (, N or S Range // B or W. WM.
ddress P (180x 3500 - 181 State Dre, Zip 97757	Section 4 NW 1/4 NE 1/4
	Tax Lot 3(2) Lot Block Subdivision
2) TYPE OF WORK	Street Address of Well (or nearest address) Snown Crke Rd
New Well Deepening Alteration (repair/recondition) Abandonment	Bench WKC
3) DRILL METHOD:	(10) STATIC WATER LEVEL:
Rotary Air Rotary Mud Cable Auger	$26.3 \text{ft. below land surface.} \qquad \text{Date } 3-26.7$
Other	
4) PROPOSED USE:	Artesian pressure b. per square inch. Date (11) WATER BEARING ZONES:
Domestic Community Industrial Irrigation	(II) WATER BEARING ZONES.
Thermal Injection Livestock Other	32/
(5) BORE HOLE CONSTRUCTION:	Depth at which water was first found3 Z/
Special Construction approval Yes MNo Depth of Completed Well 400 ft.	From To Estimated Flow Rate SWL
Explosives used Yes No Type Amount	From 10 Estimated Fow Rate 57/2
HOLE SEAL	321 400 100+ 2G
Diameter From To Material From To Sacks or pounds	
Diameter From To Material From To Sacks or pounds 14 0 02 6 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
10 145 400	
	(12) WELL LOG:
How was seal placed: Method A B C D E	Ground Elevation
Other Poured in Dry	
Backfill placed from ft. to ft. Material	Material From To SWL
Gravel placed from ft. to ft. Size of gravel	106 361 4 610 401
(6) CASING/LINER:	· Basalt 7 44
Diameter From To Gauge Steel Plastic Welded Threaded	Rown SAND Stone 44 85
16 4/6/18/ 200 1 1 1	Mild Brown Lava 85 96
Casing: 10 777 677 6250	Hard Gray Lava 96 117
	Brown SAND STORE 117 161
	Basalt 16/ 173
Liner: 8 0 400 188 10 0	Mild Lava 123 205 ee
	Broken Lava Crev. 205 225
Final location of shoe(s)	Basait 225 26/
(7) PERFORATIONS/SCREENS:	Brown Sund Stone 26 288 263
Perforations Method Fat Tory	Busalt 288 307
Screens TypeMaterial	Brown SANd Stone 307 318
Slot Tele/pipe	Lava 3/8 32/
From To size Number Diameter size Casing Lines	W.B. Broken Lava 321 324
360 900 377 910 10	Basalt 324 348
	W.B. Brocken Lava 348 352
	Lava 352 376
	W.B. Bround SANDS/0 376 400
(8) WELL TESTS: Minimum testing time is 1 hour	Date started $\frac{3-22-0}{}$ Completed $\frac{3-26-0}{}$
	(unbonded) Water Well Constructor Certification:
Flowing □ Pump □ Bailer □ Air □ Artesian	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
Yield gal/min Drawdown Drill stem at Three	and belief.
-100 F	WWC Number
	Signed Date 3-26-01
Temperature of water 53 Depth Artesian Flow Found	(bonded) Water Well Constructor Certification:
	Laccent responsibility for the construction, alteration, or abandonment work
Was a water analysis done? Yes By whom Did any strata contain water not suitable for intended use? Too little	Thereformed 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.
Salty Muddy Odor Colored Other	
	WWC Number 1253
Depth of strata:	



5039860902

Application for Well ID Number

WATER RESOURCES DEPT. SALEM, OREGON

Do not complete if the well already has a Well I.D Number or if you do not own the property where the well is located.

J	OWNER INFORMATION		•
(turrent Owner Name (please print):	mie L. Kaczma	irek
,	failing Address: P.O Box 471		
	ity, State, Zip: Bend, Ovegor		
1	failing Address (to send Well I.D.): PO BOX	471	
	ity, State, Zip: Bend, Ore		
			•
I	. WELL INFORMATION		
I	ownship: 10 (North South)	Range: East/We	est) Section:
T	ex Lot: 300 County $D\ell$	schutes NI	√ 1/4 NE 1/4
I	ot: Block:	Subdi	vision: Snow Greek Ranch
S	ot: Block: treet Address of Well, City, State:	Snow creek Lane	Sisters or Bend, Oregon 9.
	wner at time the well was constructed, (if known)		. , , , ,
	the property had a different street address in the p		
	ther Information:	Vaczmarek	
S -	JBMITTED BY (please print): Laymit	FILL ZITUO CH	
P	ione: 541 408-0002	_ FAX: <u>541312</u> 00	20 3
Se fa	nd application to Oregon Water Resources Depart ((503) 986-0902. Applications are processed and	Well I.D. Numbers are mailed ev	nite A; Salem, Oregon 97301-1266; very Tuesday.
Re	cy'd 4-21-06 Welllog: DESC		34338
	•	Well LD. Number/1	ENF
ea L	47102, assigned by r, was lost as o	•	RECEIVED
	or was lost as a	C4 71 2	APR 2 1 2006
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