

DESC  
54986

*Amended \**

WELL I.D. # L 39449

START CARD # L-151574

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.

(1) LAND OWNER  
Name TOM CAFFAZZO Well Number 01  
Address 1668 WEST HILLS Rd  
City PholemATH State OR Zip 97137

(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 310' ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12	0	18	Bentone	0	18	17
8	18	310				

How was seal placed: Method  A  B  C  D  E  
 Other POURED 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	0	18	350	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	6	10	310	158	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
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
290	310	1/8	100	6		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
46	-0-	300	1 hr

Temperature of water 55 Depth Artesian Flow Found -0-  
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 145 N or S Range 13E E or W. WM.  
Section 36B SE-1/4 SE-1/4  
Tax Lot 1200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 3550 BUTLER Rd  
Redmond, OR.

(10) STATIC WATER LEVEL:  
280' ft. below land surface. Date 9-21-02  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 290'

From	To	Estimated Flow Rate	SWL
290	310	40	280

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Top Soil	0	1	
BASALT	1	192	
BROWN SANDSTONE	192	290	
COARSE SANDSTONE	290	308	280
BASALT	308	310	

Date started 9-20-02 Completed 9-21-02

(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 1477  
Signed Daniel Davis Date 9-23-02

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

WELL I.D. # L \_\_\_\_\_  
 START CARD # L-151574

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

(1) LAND OWNER Well Number 1  
 Name TOM CAFFAZZO  
 Address 1668 West Hills Rd  
 City Ph. LOMATH State OR Zip 97870

(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 310' ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Material	Sacks or pounds	
Diameter	From	To	From		To	
12	0	18	0	Bentonite	18	17
8	18	310				

How was seal placed: Method  A  B  C  D  E  
 Other POURED 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: <u>8</u>	<u>12</u>	<u>18</u>	<u>350</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: <u>6</u>	<u>10</u>	<u>310</u>	<u>188</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
 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
<u>290</u>	<u>310</u>	<u>1/8</u>	<u>100</u>	<u>6</u>		<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
<u>46</u>	<u>-0-</u>	<u>300</u>	<u>1 hr</u>

Temperature of water 55 Depth Artesian Flow Found -0-  
 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 \_\_\_\_\_  
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 Section 36B SE 1/4 SE 1/4  
 Tax Lot 1200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 3550 BUTLER Rd  
Redmond, OR.

(10) STATIC WATER LEVEL:  
280' ft. below land surface. Date 9-21-02  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 290'

From	To	Estimated Flow Rate	SWL
<u>290</u>	<u>310</u>	<u>40</u>	<u>280</u>

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

Material	From	To	SWL
<u>Top Soil</u>	<u>0</u>	<u>1</u>	
<u>BASALT</u>	<u>1</u>	<u>192</u>	
<u>BROWN SANDSTONE</u>	<u>192</u>	<u>290</u>	
<u>COARSE SANDSTONE</u>	<u>290</u>	<u>308</u>	<u>280</u>
<u>BASALT</u>	<u>308</u>	<u>310</u>	

**RECEIVED**  
**OCT 07 2002**  
 WATER RESOURCES DEPT.  
 SALEM, OREGON

Date started 9-20-02 Completed 9-21-02

(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 \_\_\_\_\_

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 WWC Number 1677  
 Signed Danial Davis Date 9-23-02