

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

DESC 56394
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 50394

WELL ID # **70597**
 (START CARD) # 162937

(1) OWNER: Well Number: 1
 Name **Mt. Bachelor Village Assoc.**
 Address **19717 Mt. Bachelor Village Dr.**
 City **Bend** State **OR** Zip **97702**

(9) LOCATION OF WELL by legal description:
 County **Deschutes** Latitude Longitude
 Township **18S** N or S. Range **12E** E or W. of WM.
 Section **7** Lot **SW** 1/4 **NW** 1/4
 Tax lot **1700** Lot Block Subdivision
 Street Address of Well (or nearest address) **19717 Mt. Bachelor Village Dr.**

(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 **465** ft.
 Explosives used Yes No Type Amount

| HOLE | | | SEAL | | | Amount |
|----------|------|-----|-----------|------|----|-----------------|
| Diameter | From | To | Material | From | To | sacks or pounds |
| 15in | 0 | 65 | Bentonite | 0 | 8 | 16 sacks |
| 10 | 65 | 385 | Cement | 8 | 65 | 66 sacks |
| 8in | 385 | 465 | | | | |

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: 10in | +2 | 65 | .250 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner: 10in | -25 | 385 | .188 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |

(7) PERFORATIONS/SCREENS:

Perforations Method **Factory SAW**
 Screens Type Material

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|-----|-----------|--------|----------|----------------|--------------------------|-------------------------------------|
| 365 | 385 | 1/8 | 420 | | | <input type="checkbox"/> | <input checked="" type="checkbox"/> |

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

Pump Bailer Air Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time |
|---------------|----------|---------------|-------|
| 350 | 2 | 350 | 4 hr. |
| 500+ | 8-10 | 425 | 1 hr. |

Temperature of Water **53** 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: _____

(10) STATIC WATER LEVEL:
302 ft. below land surface. Date **8/27/04**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found **327**

| From | To | Estimated Flow Rate | SWL |
|------|-----|---------------------|-----|
| 327 | 465 | 1000 | 302 |

(12) WELL LOG: Ground elevation _____

| Material | From | To | SWL |
|--|------|-----|-----|
| Sandy Loam | 0 | 4 | |
| Tanish Pumice | 4 | 48 | |
| White Pumice | 48 | 56 | |
| Gray Basalt | 56 | 62 | |
| Brown Basalt | 62 | 74 | |
| Gray Basalt | 74 | 100 | |
| Gray & Brown Basalt | 100 | 119 | |
| Red Sandstone | 119 | 124 | |
| Brown Sandstone | 124 | 177 | |
| Fractured Broken Volcanics | 177 | 182 | |
| Hard Gray Basalt | 182 | 214 | |
| Red Cinders & Brown Basalt | 214 | 226 | |
| Hard Gray Basalt | 226 | 252 | |
| Tan Ash & Volcanic Debris | 252 | 271 | |
| Hard Gray Basalt | 271 | 289 | |
| Tan Ash & Boulders | 289 | 327 | |
| Gray Basalt some fractures WB | 327 | 355 | 302 |
| Fractured Basalt & Cinders WB | 355 | 362 | 302 |
| Hard Gray Basalt & Fractures WB | 362 | 371 | 302 |
| Broken Basalt & Cinders WB | 371 | 385 | 302 |
| Fractured Gray Basalt & Red Cinders WB | 385 | 465 | 302 |

Date started **8/23/04** Completed **8/27/04**

(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 my best knowledge and belief.
WESTERN WATER DEVELOPMENT
 P.O. Box 1670 WWC Number _____
 Signed _____ Date **Redmond, OR 97778**

(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 **Robert Buckner** WWC Number **1385**
 Date **11/10/04**

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ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER

FEB 10 2005

**WATER RESOURCES DEPT
 SALEM, OREGON**