

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

DESC 5430

OCT 17 1988

19N/8W-56A

(1) OWNER: Owner's Well Number: 445-88-23
 Name Deschutes National Forest
 Address 1645 Highway 20 East
 City Bend State Oregon Zip 97701

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Depth of Completed Well 100 ft.
 Special Standards date of approval no

Diameter	HOLE		SEAL		Amount sacks or pounds
	From	To	Material	To	
"	0	-20	type 0	-20	15 sks cement
			1&2		
8"	20	110			

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	Material			
				Steel	Plastic	Welded	Threaded
Casing: 6"	1 1/2	100	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input 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
0	100	1/8	234			<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 20 Pumping level _____ Drill stem at 110 Time 1 1/2 hr
 _____ _____ _____ _____ 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: _____

(9) LOCATION OF WELL by legal description:
 County Deschutes Latitude _____ Longitude _____
 Township 19 N or S, Range 8 E or W, WM.
 Section 5 NW 1/4 NE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Little Fawn Camp Ground

(10) STATIC WATER LEVEL:
36 ft. below land surface. Date 9-24-88
 Artesian pressure _____ lb. per square inch. Date _____

(11) WELL LOG: Ground elevation _____

Material	From	To	WB?	SWL
Sandy Loam & Pumice	0	7		
Boulder Congl.	7	16		
Broken Gray Lava	16	30		
Hard Black Lava	30	42		
Broken Lava	42	47		36
Lava Congl & Cinder	47	110		

Date started 9-21-88 Completed 9-24-88

(unbonded) Water Well Constructor Certification:
 I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed _____ Date _____

(bonded) Water Well Constructor Certification: WWC # 685

I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed [Signature] Date 9-24-88

Company Big Three Drilling Co. Job No. _____