

WELL LABEL # L 90029

START CARD # 1001140

**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_  
 First Name DENNIS Last Name SZIGEP  
 Company LEADER BIULDERS  
 Address 117 NE GREENWOOD AVE.  
 City BEND State OR Zip 97701

**(2) TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (repair/recondition)  Abandonment

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

**(4) PROPOSED USE**  Domestic  Irrigation  Community  
 Industrial/ Commercial  Livestock  Dewatering  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard  (Attach copy)  
 Depth of Completed Well 335.00 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
12	0	18.5	Bentonite	0	18.5	11	S
8	18.5	335					

How was seal placed: Method  A  B  C  D  E

Other Poured Dry

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(6) CASING/LINER**

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	8	<input checked="" type="checkbox"/>	1.5	18.5	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	6	<input type="checkbox"/>	5	335	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe  Inside  Outside  Other Location of shoe(s) 335

Temp casing  Yes Dia 6 From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**

Perforations Method Machined

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/	Casing/	Screen	Scrn/slot	Slot	# of	Tele/		
Screen	Liner	Dia	From	To	width	length	slots	pipe size
Perf	Liner	6	305	325	.13	4	256	

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
20		330	1

Temperature 54 °F Lab analysis  Yes By \_\_\_\_\_

Water quality concerns?  Yes (describe below)

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**

County Deschutes Twp 15.00 S N/S Range 11.00 E E/W WM

Sec 32 NW 1/4 of the NE 1/4 Tax Lot 200

Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Street address of well  Nearest address

67155 SUNBURST ST.

**(10) STATIC WATER LEVEL**

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening				
Completed Well	<u>06-04-2007</u>			<u>251</u>

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 294

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
<u>06-04-2007</u>	<u>294</u>	<u>335</u>	<u>20</u>			<u>251</u>

**(11) WELL LOG**

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

Material	From	To
Top Soil	0	3
Boulders	3	7
Hard Grey Lava	7	116
Mild Brown Lava	116	126
Brown Sandstone	126	153
Hard Grey Lava	153	163
Broken Lava	163	166
Hard Grey Lava	166	188
Broken Lava	188	194
Hard Grey Lava	194	200
Broken Lava	200	214
Brown Sandstone	214	281
Hard Grey Lava	281	294
Coarse Tan Sandstone	294	329
Broken Lava	329	335

Date Started 06-01-2007 Completed 06-04-2007

**(unbonded) Water Well Constructor Certification**

I certify that the work I performed on the construction, deepening, 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.

License Number 1276 Date 06-07-2007

Electronically Filed

Signed VINCENT MACKEY (E-filed)

**(bonded) Water Well Constructor Certification**

I accept responsibility for the construction, deepening, 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.

License Number 1819 Date 06-07-2007

Electronically Filed

Signed JEFFREY R RANDALLS (E-filed)

Contact Info (optional)