

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

WELL I.D. # L 91701
START CARD # 190753

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

(1) LAND OWNER Jennifer Harding Well Number _____
Name _____
Address 16711 Fair Mile Rd
City Sisters State OR Zip 97759

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

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other _____

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well -670 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
12	0	19	Bentondk	0	19	14 sacks
8	19	-670				

How was seal placed: Method A B C D E
 Other powder Dry
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Casing/Liner	Diameter	From	To	Gauge	Steel			
					Plastic	Welded	Threaded	
Casing:	8	0	-19	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	6	-10	-670	.188	<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 med
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
650	-670	3/8	166	6		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
15+	0	-665	1hr

Temperature of water 51° 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 (legal description)
County Desc
Tax Lot 600 Lot _____
Township 14 S N or S Range 10 E E or W WM
Section 26 A 3W 1/4 NS 1/4
Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)
Street Address of Well (or nearest address) 16711 Fair Mile

(10) STATIC WATER LEVEL
-515 ft. below land surface. Date 7-17-07
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found -550

From	To	Estimated Flow Rate	SWL
-550	-670	15+	-515

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Sandy Soil + Blot	0	4	
Hard gray Lava	4	21	
Red cinders	21	46	
Hard Brn Rock	46	77	
Brn SS congl	77	180	
Brkn Rock + Brn Clay	180	230	
Fract gray LAVA	230	330	
Brn SS	330	365	
Fract gray LAVA	365	377	
Hard gray Basalt	377	515	
Brk SS	515	560	-515
Brn congl	560	610	
Red cinder congl	610	655	
Hard gray Basalt	655	670	

Date Started 7-12-07 Completed 7-17-07

(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.

WWC Number _____ Date _____

Signed _____

(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.

WWC Number 1568 Date 7-18-07

Signed David J. Kuhn

RECEIVED

AUG 01 2007