

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

05-08-2008

WELL LABEL # L 96140

START CARD # 1003414

(1) LAND OWNER Owner Well I.D. \_\_\_\_\_

First Name TERRY Last Name REYNOLDS
Company
Address 1515 LOWERBRIDGE WAY
City TERREBONNE State OR Zip 97760

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

(3) DRILL METHOD

[X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE [X] Domestic [ ] Irrigation [ ] Community

[ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION Special Standard [ ] (Attach copy)

Depth of Completed Well 350.00 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, Sacks/lbs. Includes data for Bentonite seal at 0-18.5 ft.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E

[X] 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

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes data for 8" and 6" casings.

Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s) \_\_\_\_\_

Temp casing [ ] Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS

Perforations Method \_\_\_\_\_

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

Perf/S Casing/ Screen Dia From To Scrn/slot width Slot length # of slots Tele/ pipe size

Table for perforations/screens with columns: Perf/S, Casing, Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size.

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

[ ] Pump [ ] Bailer [ ] Air [ ] Flowing Artesian

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

Table for well tests with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr).

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

Water quality concerns? [ ] Yes (describe below)

Table for water quality concerns with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County Deschutes Twp 14.00 S N/S Range 13.00 E E/W WM
Sec 16 NW 1/4 of the NE 1/4 Tax Lot 107

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

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

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

[X] Street address of well [ ] Nearest address

1515 LOWER BRIDGE WAY

(10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)

Existing Well / Predeepening \_\_\_\_\_

Completed Well 05-06-2008 180

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 180

SWL Date From To Est Flow SWL(psi) + SWL(ft)

05-06-2008 180 187 15 180

05-06-2008 302 350 40 180

(11) WELL LOG

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

Table for well log with columns: Material, From, To. Lists layers like SANDY BROWN PUMICE, GRAY BASALT, BROWN SANDSTONE, etc.

Date Started 05-05-2008 Completed 05-06-2008

(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 1831 Date 05-08-2008

Electronically Filed

Signed ALLEN R PECK (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 1720 Date 05-08-2008

Electronically Filed

Signed JACK ABBAS (E-filed)

Contact Info (optional)

**(5) BORE HOLE CONSTRUCTION**

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		

**FILTER PACK**

From	To	Material	Size

**(6) CASING/LINER**

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**(7) PERFORATIONS/SCREENS**

Perf/S creen	Casing/ Liner	Screen Dia	From	To	Scr/slot width	Slot length	# of slots	Tele/ pipe size

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

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

**Water Quality Concerns**

From	To	Description	Amount	Units

**(10) STATIC WATER LEVEL**

**Water Bearing Zones**

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
					<input type="checkbox"/>	
					<input type="checkbox"/>	
					<input type="checkbox"/>	
					<input type="checkbox"/>	
					<input type="checkbox"/>	
					<input type="checkbox"/>	
					<input type="checkbox"/>	
					<input type="checkbox"/>	

**(11) WELL LOG**

Material	From	To

**Comments/Remarks**

THIS WELL REPLACES DESCH # 2386