

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

03-17-2010

Amendment

WELL LABEL # L 101169
START CARD # 1009511

(1) LAND OWNER Owner Well I.D. C
First Name Last Name
Company AVION WATER CO
Address 60813 PARRELL RD
City BEND State OR Zip 97701

(2) TYPE OF WORK [ ] New Well [X] Deepening [ ] Conversion
[X] 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 [X] Community
[ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION Special Standard [ ] (Attach copy)
Depth of Completed Well 442.00 ft.

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, sacks/lbs

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

[X] Other Did Not Disturb

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

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

Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Machine
Screens Type Material

Table with columns: Perf/S, Casing/Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tel/pipe size

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

Table with columns: Pump/Bailer/Air/Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr)

Temperature 52 °F Lab analysis [ ] Yes By

Water quality concerns? [ ] Yes (describe below)

Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)
County Deschutes Twp 18.00 S N/S Range 12.00 E E/W WM
Sec 21 SE 1/4 of the NE 1/4 Tax Lot 106
Tax Map Number 181221.00.00106 Lot 6
Lat Long DMS or DD
Street address of well Nearest address
60645 TEKAMPE RD
SKYLANDIA Sub division

(10) STATIC WATER LEVEL table with columns: Existing Well / Predeepening, Date, SWL(psi), SWL(ft)

WATER BEARING ZONES table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft)

(11) WELL LOG table with columns: Material, From, To

RECEIVED

APR 15 2010

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 03-02-2010 Completed 03-15-2010

(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.

License Number 758 Date 03-17-2010
Electronically Filed
Signed THOMAS 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.

License Number 1720 Date 03-17-2010
Electronically Filed
Signed JACK ABBAS (E-filed)
Contact Info (optional)

