

**STATE OF OREGON  
WATER SUPPLY WELL REPORT**

(ORS 537.765 & OAR 690-205-0210)

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

**DESC 59454**

Desc  
59454

WELL LABEL # L  
START CARD #  
ORIGINAL LOG #

104457  
189580

**(1) LANDOWNER** Owner Well I.D.  
First Name Dave Last Name Rath  
Company PO Box  
Address  
City Christmas Valley State OR Zip 97641

**(2) TYPE OF WORK**  New  Conversion  Deepening  
 Alteration (complete Sections 2a & 10)  Abandonment (complete Section 5a)

**(2a) PRE-ALTERATION:** Well Depth \_\_\_\_\_ ft.  
Seal Material \_\_\_\_\_  
Casing Type:  Steel  Plastic  Other \_\_\_\_\_  
Casing Gauge \_\_\_\_\_ Casing Diameter \_\_\_\_\_

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

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

**(5) BORE HOLE CONSTRUCTION**  
Depth of Completed Well 460 ft. Special Standard:  Yes (attach copy)

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amount	Seks/lbs
24"	0	30	BENT	0	30	48	Sck
16"	30	460					

How was seal placed: Method  A  B  C  D  E

Other 3 mm perl BENT  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

**(5a) ABANDONMENT USING UNHYDRATED BENTONITE:**  
Calculated Amount Proposed to be Used: \_\_\_\_\_ sacks/lbs  
Actual Amount Used: \_\_\_\_\_ sacks/lbs

**(6) CASING/LINER**

Csng/Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
<u>16"</u>	<u>16"</u>	<u>+</u>	<u>7</u>	<u>31</u>	<u>.250</u>	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	

Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_  
Temporary casing  Yes Diameter \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
Perforations Method \_\_\_\_\_  
Screens Type \_\_\_\_\_ Material \_\_\_\_\_

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

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailor  Air  Flowing Artesian  
Yield gal/min 1750 Drawdown \_\_\_\_\_ Drill stem/Pump depth 460 Duration (hr) 1 hr

Temperature 50 °F Lab analysis  Yes By \_\_\_\_\_  
Water quality concerns?  Yes (describe below) TDS \_\_\_\_\_ ppm

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**  
County Dech Twp 22 N or S Range 20 E or W W.M.  
Sec 3 NE 1/4 of the NE 1/4 Tax Lot 300  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Street Address of Well (or nearest address) 41600 HWY 20  
Brothm rd 97712

**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Pre-Alteration	<u>11-25-11</u>			<u>146'</u>
Completed Well				

Flowing Artesian?  Yes Dry Hole?  Yes  
WATER BEARING ZONES Depth water was first found 240

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>11-25-11</u>	<u>240</u>	<u>245</u>	<u>100 gpm</u>			<u>146</u>
	<u>360</u>	<u>370</u>	<u>100 gpm</u>			<u>11</u>
	<u>370</u>	<u>460</u>	<u>100 gpm</u>			<u>11</u>

**(11) WELL LOG** Ground Elevation \_\_\_\_\_

Material	From	To
<u>TOP SOIL</u>	<u>0</u>	<u>2</u>
<u>Brown Clay</u>	<u>2</u>	<u>25</u>
<u>Brown Layer Rock</u>	<u>25</u>	<u>130</u>
<u>Blue Clay</u>	<u>130</u>	<u>240</u>
<u>Gray Layer Rock</u>	<u>240</u>	<u>300</u>
<u>Pink Pumice</u>	<u>300</u>	<u>460</u>

**RECEIVED**  
**RECEIVED BY OWRD**  
**APR 25 2012**  
**JUL 12 2012 WATER RESOURCES DEPT SALEM, OREGON**  
**SALEM, OR**

Date Started 11-14-11 Completed 11-25-11

**(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 \_\_\_\_\_ 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.

License Number 1654 Date 4-6-12

Signed [Signature]  
Contact Info. (optional) \_\_\_\_\_

STATE OF OREGON  
WATER SUPPLY WELL REPORT

DESC 59454

WELL LABEL # L 1044 57  
START CARD # 189580  
ORIGINAL LOG # \_\_\_\_\_

(ORS 537.765 & OAR 690-205-0210)

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 Cable  Cable Mud  Reverse Rotary  Other \_\_\_\_\_

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Depth of Completed Well 460 ft. Special Standard:  Yes (attach copy)

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amount	Scks/lbs
<u>24"</u>	<u>0</u>	<u>30</u>	<u>Bent</u>	<u>0</u>	<u>3</u>	<u>48</u>	<u>Sck</u>
<u>16"</u>	<u>30</u>	<u>460</u>					

How was seal placed: Method  A  B  C  D  E  
 Other 3 mm PVC Bent  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
<u>1750</u>		<u>460</u>	<u>1 hr</u>

Temperature 50 °F Lab analysis  Yes By \_\_\_\_\_  
Water quality concerns?  Yes (describe below) TDS \_\_\_\_\_ ppm

From	To	Description	Amount	Units

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	<u>360</u>	<u>370</u>	<u>1000 gal</u>			<u>11'</u>
	<u>370</u>	<u>460</u>	<u>200 gal</u>			<u>4'</u>

(11) WELL LOG Ground Elevation \_\_\_\_\_

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