

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

DESC 59759

8/16/2013

WELL I.D. LABEL# L

START CARD #

ORIGINAL LOG #

112202
1020532

(1) LAND OWNER

Owner Well I.D.
First Name TROY Last Name MEEDER
Company
Address 19344 INNES MARKET RD
City BEND State OR Zip 97701

(2) TYPE OF WORK

[X] New Well [ ] Deepening [ ] Conversion
[ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrld
Material From To Amt sacks/lbs
Seal:

(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

Depth of Completed Well 672.00 ft. Special Standard [ ] (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 12, 0, 39, Bentonite Chips, 0, 39, 24, S. Row 2: 8, 39, 672.

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

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrld. Row 1: 8, 1, 39, .250, [X]. Row 2: 6, 10, 672, .188, [X].

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

Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method FACTORY

Screens Type Material

Table with columns: Perf/ Screen, Casing/ Liner, Dia, From, To, Scrm/slot width, Slot length, # of slots, Tele/ pipe size. Row 1: 6, 652, 672, .125, 0.3, 228.

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

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

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 20, 672, 1.

Temperature 53 °F Lab analysis [ ] Yes By

Water quality concerns? [ ] Yes (describe below) TDS amount

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

(9) LOCATION OF WELL (legal description)

County DESCHUTES Twp 16.00 S N/S Range 11.00 E E/W WM

Sec 12 SE 1/4 of the SW 1/4 Tax Lot 1700

Tax Map Number Lot

Lat ' ' or ' ' DMS or DD

Long ' ' or ' ' DMS or DD

[X] Street address of well [ ] Nearest address

19344 INNES MARKET RD

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Row 1: 8/15/2013, 569.

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES

Depth water was first found 618.00

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

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 8/15/2013, 618, 672, 20, 569.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Rows include SANDY PUMICE, MILD BROWN LAVA WEATHERED, SANDSTONE RED, BROWN SANDSTONE, RED SANDSTONE, GRAY LAVA, BROWN LAVA, BROWN SANDSTONE, SANDSTONE CONGLOMERATE, FRACTURED GRAY LAVA.

Date Started 8/13/2013 Complete 8/15/2013

(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 1720 Date 8/16/2013

Signed JACK ABBAS (E-filed)

Contact Info (optional) JACK ABBAS