

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

DESC 59987

WELL I.D. LABEL# L

114526

START CARD #

1023292

6/11/2014

ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name JAMES Last Name VERHEYDEN
Company
Address 18400 BULL SPRINGS 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 414.00 ft. Special Standard [] (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 12, 0, 38.5, Bentonite Chips, 0, 38.5, 48, S. Row 2: 8, 38.5, 414.

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, 1.5, 38.5, .250, [X]. Row 2: 6, 3, 414, .188, [X].

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

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method AIR PERFERATOR

Screens Type Material

Table with columns: Perf/ Screen, Casing/ Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Row 1: 6, 395, 410, .125, 2, 360.

(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: 50, 400, 1.

Temperature 51 °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 17.00 S N/S Range 11.00 E E/W WM

Sec 16 NE 1/4 of the SE 1/4 Tax Lot 4306

Tax Map Number Lot

Lat " or 44.09886111 DMS or DD

Long " or -121.40505556 DMS or DD

[X] Street address of well [] Nearest address

18400 BULL SPRINGS RD

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Row 1: 6/4/2014, 325.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 370.00

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 6/4/2014, 370, 414, 50, 325.

(11) WELL LOG

Ground Elevation 3728.00

Table with columns: Material, From, To. Rows include SAND PUMICE, LAVA BROKEN, CINDER, BASAL CINDERS BROKEN, LAVA GRAY HARD, CINDERS CONGLOMERATE, SANDSTONE CONGLOMERATE BROWN, BASALT, SANDSTONE BROWN, GRAVELS SAND.

Date Started 6/2/2014 Complete 6/4/2014

(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 758 Date 6/11/2014

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. 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 6/11/2014

Signed JACK ABBAS (E-filed)

Contact Info (optional)