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

DESC 60471

12/10/2015

WELL I.D. LABEL# L	120253
START CARD #	1028338
ORIGINAL LOG #	

(1) LAND OWNER

Owner Well I.D.

First Name MILTON Last Name STUBBS

Company

Address 4441 SE 31ST CT

City GRESHAM State OR Zip 97080

(2) TYPE OF WORK

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

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:									

	Material	From	To	Amt	sacks/lbs
Seal:					

(3) DRILL METHOD

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

(4) PROPOSED USE

[X] Domestic [ ] Irrigation [ ] Community
[ ] Industrial/ Commericial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)

Depth of Completed Well 77.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs
10	0	20	Bentonite Chips	0	20	12	S
6	20	77			Calculated	9.4	
					Calculated		

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

[X] Other 3 MINUTE POUR

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

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
(•)	( )	6	[X]	1	70	.250	(•)	( )	[X]	[ ]
( )	(•)	4.5	[ ]	70	77	SDR 26	( )	(•)	[X]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]

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

Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type Saw Cut Material PVC

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Liner	4.5	70	77	.01	2	1950	4.5

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

(•) Pump ( ) Bailer ( ) Air ( ) Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
15	12	28	2

Temperature 43 °F Lab analysis [ ] Yes By

Water quality concerns? [ ] Yes (describe below) TDS amount 100 ppm

From	To	Description	Amount	Units
8	12	Total Disolved Solids	125	ppm
68	77	Total Disolved Solids	100	ppm

(9) LOCATION OF WELL (legal description)

County DESCHUTES Twp 20.00 S N/S Range 10.00 E E/W WM

Sec 13 SW 1/4 of the NE 1/4 Tax Lot 14300

Tax Map Number Lot

Lat ° ' " or DMS or DD

Long ° ' " or DMS or DD

(•) Street address of well ( ) Nearest address

17071 MERCED RD, BEND

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration			[ ]	
Completed Well	10/5/2015		[ ]	16

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 8.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
10/5/2015	8	12	5		[ ]	7
9/5/2015	68	77	15		[ ]	17
					[ ]	
					[ ]	
					[ ]	

(11) WELL LOG

Ground Elevation

Material	From	To
Pummie	0	2
Sand clay mix	2	8
Brown sand course	8	13
gray clay	13	68
Sand and gravel	68	77

Date Started 9/30/2015 Completed 10/5/2015

(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 1614 Date 12/10/2015

Signed SAM J OLSON (E-filed)

Contact Info (optional) 541-536-5339