

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.765)

067
DESC

JUN 21 1990

15S/11E/31ab
 20476

(START CARD) #

(1) OWNER: Well Number: _____
 Name Don Schnack
 Address 17509 Palidin
 City Bend State OR Zip 97701

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No

 Depth of Completed Well 360 ft.
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12	0	18	Cement	0	18	10 Sac.
8	18	360				

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8	+1	18	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 6	+1	360	.188	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method factory
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
340	360					<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
26	0	350	1 hr.

Temperature of water 52 Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County Desch Latitude _____ Longitude _____
 Township 15S N or S, Range 11E E or W, WM.
 Section 31 NW ¼ NE ¼
 Tax Lot 31 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Palidin Estates
Bend

(10) STATIC WATER LEVEL:
300 ft. below land surface. Date 6-14-90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 302

From	To	Estimated Flow Rate	SPY
302	360	26	3.1

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Top Soil	0	3	
Gravel	3	6	
Brown Sand Stone	6	57	
Java fractured	57	78	
Red Cinder Congl.	78	90	
Basalt fracture	90	170	
Brown Sand Stone	170	185	
fractured Basalt	185	220	
Brown Sand Stone	220	243	
Fractured Basalt	243	257	
Brown Sand Stone Congl.	257	302	
fractured Basalt & Sand Stone (w.B)	302	341	
Brown Sand Stone (w.B)	341	355	
Brown Red Cinder (w.B)	355	360	

Date started 6-12-90 Completed 6-14-90

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed Jack Abbas (Helper) WWC Number _____
 Date _____

(bonded) Water Well Constructor Certification:
 I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed William D. Helm WWC Number 1255
 Date _____