

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

DESC
864

145/10E/27cc
23141

(1) OWNER: Well Number: _____
Name Richard & Loretta Kriege
Address P.O. Box 731
City Sisters, State ORE Zip 97759

(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:
Construction approval Yes ☐ No ☒ Depth of Completed Well 85 ft.
Explosives used Yes ☐ No ☒ Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
12"	0 18	Cement	0 18	14 sacks	
8"	18 85				

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 _____

Diameter		From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:		8"	18"	19	250	☒	☐	☐
Liner:						☐	☐	☐

Final location of shoe(s) _____

PERFORATIONS/SCREENS:									
☐ Perforations		Method		NONE					
☐ Screens		Type		Material					
From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner		
						☐	☐		
						☐	☐		
						☐	☐		
						☐	☐		
						☐	☐		
						☐	☐		

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☒ Bailor ☐ Air ☐ Flowing ☐ Artesian
Yield gal/min 20 GPM Drawdown 0 Drill stem at _____ Time 1 hr.

Temperature of water 53 Depth Artesian Flow Found _____
Was a water analysis done? ☐ Yes By whom NO
Did any strata contain water not suitable for intended use? ☐ Too little
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other NONE
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County DESCHUTES Latitude _____ Longitude _____
Township 14 Nor S, Range 10 E or W, WM.
Section 27 SW 1/4 SW 1/4 CAMP POLK
Tax Lot _____ Lot 3 Block 1 Subdivision HEILS-FTS
Street Address of Well (or nearest address) CAMP POLK ROAD

(10) STATIC WATER LEVEL:
25 ft. below land surface. Date 4-13-91
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 68 feet

From	To	Estimated Flow Rate	SWL
68	85	20 GPM	35

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Brown Hard Pan	0	14	
Brown Sand stone	14	35	26
Red Sand Stone	35	65	
Brown Lava Broken	65	85	
Seams of water			

RECEIVED
JUL - 6 1993
WATER RESOURCES DEPT.
SALEM, OREGON
MAY 8 1991
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 04-11-91 Completed 04-13-91

(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 _____ 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 ESB M/11/91 WWC Number 594
Date 7-15-91