

DESC 9022

21S/10E/13ac

Well Number

(2) TYPE OF WORK:

☒ New Well ☐ Deepen ☐ Recondition ☐ Abandon

(3) DRILL METHOD:

☐ Rotary Air ☐ Rotary Mud ☒ Cable

☐ Other

☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Other

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 279 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☒ Other panel Dry

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:	6"	71	250	260	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	5"	87	279	125	☐	☒	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

☒ Perforations Method Sample
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
274	279	020	500	5"		☒	☒
						☐	☐
						☐	☐
						☐	☐
						☐	☐

☒ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time .
20'	8'		1 hr.

Temperature of Water 47° 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: _____

County Orcutt Latitude _____ Longitude _____
Township 21 N or S. Range 10 E or W. WM.
Section 13 A $\frac{1}{4}$ C $\frac{1}{4}$ _____
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

12' ft. below land surface. Date 8-1-63
Artesian pressure _____ lb. per square inch. Date _____

Depth at which water was first found 12'

From	To	Estimated Flow Rate	SWL
12	12	?	12
274	579	20	12

2. Ground elevation _____

[illegible]

Date started 9-1-93 Completed 10-30-93

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 _____

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 [Signature] WWC Number 138
Date 10-1-93

FOR WATER RESOURCES DEPARTMENT USE ONLY

Date Postmarked 9-28-93

Date Hand-delivered _____

Watermaster Initials _____

W 58836

WRD Receipt 105125Date Fee Received 9-28-93

CHECK NO. _____

START CARD

NOTICE OF BEGINNING OF WELL CONSTRUCTION

(as required by ORS 537.762)

RECEIVED

SEP 28 1993

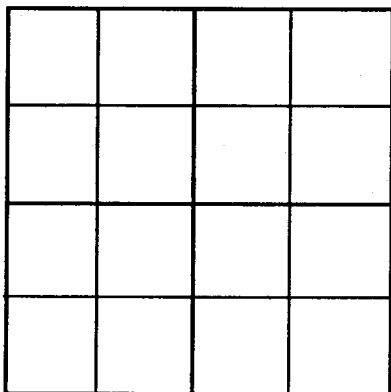
This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original mailed or delivered to the Water Resources Department, 3850 Portland Road NE, Salem, OR 97310, no later than the day construction or conversion or abandonment work begins. A **\$75 fee shall accompany all notices for new well construction or conversion of an existing hole not previously used as a water well** (make checks payable to the Water Resources Department). Notices meeting this requirement but received without the required fee will not be accepted as properly and timely filed. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$75 fee with the start card and for failure to submit cards prior to beginning any construction, alteration, conversion or abandonment work.

Owner's name and mailing address Wallen Burg

Check type of work: Fee Required ☒ New construction ☐ Conversion No Fee Required ☐ Repair ☐ Deepening ☐ Recondition ☐ Abandonment

Proposed Commencement Date 9-27-93 Existing or Proposed Well Depth 200' Diameter 6"

Check Use: ☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation ☐ Monitoring ☐ Thermal ☐ Injection ☐ Other _____

Proposed Well Location: County Deschutes Owner's Well Id. No. _____Township 20 (N or S) Range 10 (E or W) Section 14

1. _____ 1/4 of _____ 1/4 of above section

2. Street address of 16445 Huntington well location _____

3. Tax lot number of well location _____

4. Attach map with location identified.
(See reverse of this form for approved maps)

5. Show well location within 1/4, 1/4 of section grid at left.

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks, septic drain fields and other hazards. (See #2 on back)

Owner's signature _____

Title _____

Date _____

Home phone _____

Work phone _____

Michael Prodan

Bonded Water / Monitor Well Constructor

License No. 1458

Company _____

NOTE: This is not a water right application. The owner is responsible for obtaining a water right through the Water Resources Department, if required.

THIS COPY TO WATER RESOURCES DEPARTMENT IN SALEM