

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

2/23/2024

(1) LAND OWNER
Owner Well I.D.
First Name Last Name
Company CRUM FARMING INC
Address PO BOX 67
City IONE State OR Zip 97843

(2) TYPE OF WORK
New Well Deepening Conversion
Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Seal: Cement 0 200 123 Sacks

(3) DRILL METHOD
Rotary Air Rotary Mud Cable Auger Cable Mud
Reverse Rotary Other

(4) PROPOSED USE
Domestic Irrigation Community
Industrial/ Commercial Livestock Dewatering
Thermal Injection Other

(5) BORE HOLE CONSTRUCTION
Special Standard (Attach copy)
Depth of Completed Well 825.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, sacks/lbs. Includes rows for BORE HOLE and SEAL.

Seal placement method A B C D E Other:
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Type Amount
Seal Placement Begin Date Begin Time

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe Inside Outside Other Location of shoe(s)
Temp casing Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature 69 °F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 150 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County GILLIAM Twp 1.00 N N/S Range 22.00 E E/W WM
Sec 8 SE 1/4 of the SW 1/4 Tax Lot 1001
Tax Map Number Lot
Lat " or 45.57700068 DMS or DD
Long " or -120.09378886 DMS or DD
Street address of well Nearest address

CORNER OF EIGHTMILE RD & TREE LANE ARLINGTON OR

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration 2/7/2024 312
Completed Well 2/19/2024 312
Flowing Artesian? Dry Hole?

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). WATER BEARING ZONES

(11) WELL LOG
Ground Elevation
Material From To
EXISTING WELL 0 660
REAMED EXISTING WELL FROM 8" TO 12" 660 825

Construction
Begin Date 2/7/2024 Begin Time 00 00 End Date 2/19/2024

(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 1963 Date 2/23/2024
Signed JOHN KLINE (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 1881 Date 2/23/2024
Signed GARRY ZOLLMAN (E-filed)
Contact Info (optional) GARRY ZOLLMAN

**WATER SUPPLY WELL REPORT - continuation page**

GILL 50886

WELL I.D. LABEL# L 87764

START CARD # 1072549

ORIGINAL LOG #

2/23/2024

**(2a) PRE-ALTERATION**

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

  

Material	From	To	Amt	sacks/lbs

**(5) BORE HOLE CONSTRUCTION**

BORE HOLE				SEAL				sacks/ lbs
Dia	From	To	Material	From	To	Amt	lbs	
								Calculated
								Calculated
								Calculated
								Calculated

**FILTER PACK**

From	To	Material	Size

**(6) CASING/LINER**

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

**(7) PERFORATIONS/SCREENS**

Perf/ Screen	Casing/ Liner Dia	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

**Water Quality Concerns**

From	To	Description	Amount	Units

**(10) STATIC WATER LEVEL**

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)

**(11) WELL LOG**

Material	From	To

Name of person(s) who assisted with construction and Trainee License # / Helper #

Assistant Name	Type	#
TUCKER NEVILLE	HELPER WATER	8888863
CAIN SMITH	HELPER WATER	8888861

**Comments/Remarks**

REAMED WELL FROM 660'-825'. WELL IS CAVED IN @ 745'.