

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

GRAN 50906

WELL I.D. # L 85022
START CARD # 184861

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER

Name SAM Mc DANIELS Well Number _____
Address 27972 LITTLE INDIAN CIR. RES.
City John Day State OR Zip 97845

(2) TYPE OF WORK

☒ New Well
☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Other _____

(4) PROPOSED USE

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

(5) BORE HOLE CONSTRUCTION

Special Construction: ☐ Yes ☒ No
Depth of Completed Well 300 ft.
Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
12	0	120	GRAVEL	0	120	27 Sacks
4	120	300				

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

☐ Other _____

Backfill placed from _____ ft. to _____ ft. Material GRAVEL

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	8	0	137	.25	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	6	0	300	.88	☐	☒	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☒ None

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS

☒ Perforations Method SLOT CUT
☐ Screens Type SAW CUT Material PVC

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
160	300	.88	6	6	6	☐	☒
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
100	100%	300	1hr.

Temperature of water 56 Depth Artesian Flow Found 142

Was a water analysis done? ☐ Yes By whom _____

Did any strata contain water not suitable for use? ☐ Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

(9) LOCATION OF WELL (legal description)

County GRANT
Tax Lot 2000 Lot _____
Township 13 South N or S Range 38 East E or W WM
Section 19 NE 1/4 SW 1/4
Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address)

27972 LITTLE INDIAN CIR. ROAD.

(10) STATIC WATER LEVEL

66 ft. below land surface. Date 19 SEPT. 07
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

From	To	Estimated Flow Rate	SWL
137	285	120 gpm	66

(12) WELL LOG

Material	From	To	SWL
Top Soil	0	2	
Red Clay & Boulder	2	56	
TAU CLAY GRAVELS	56	137	66
RAVINE SANDSTONE FORMATION	137	285	
GRAVEL WATER BEARING ZONE	285	300	
Red Clay & GRAVEL	285	300	

RECEIVED

SEP 24 2007

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 30 July 07 Completed 1 Aug - 07

(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.

WWC 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.

WWC Number 1712 Date 19 SEPT 07

Signed _____