

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

1656  
HARN

RECEIVED  
HARN 1656  
SEP 13 1989

32 1/2 S / 33 E / 33 ac  
Jackman/Park  
11448

WATER RESOURCES DEPT.

(START CARD) #

(1) OWNER:

Name BLM, Burns District  
Address HC 74 12533 Hwy 20 West  
City Hines State OR Zip \_\_\_\_\_

Well Number: SALEM 019001

(9) LOCATION OF WELL by legal description:

County Harney Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 32 1/2 S N or S, Range 33 E E or W, WM.  
Section 33 SW  $\frac{1}{4}$  NE  $\frac{1}{4}$   
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) French Glen  
(nearest address)

(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 Park use

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No  
Yes No  Depth of Completed Well 55 ft.  
Explosives used  Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	20	Cement	0	20	8 sacks
8"	20	55				

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:

Casing/Liner	Diameter	From	To	Gauge	Steel		Plastic		Welded	Threaded
					✓					
Casing:	6"	71	55	.250	✓				✓	
Liner:										

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

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

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
40		55	1 hr.

Temperature of water \_\_\_\_\_ 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: \_\_\_\_\_

(10) STATIC WATER LEVEL:

18 ft. below land surface. Date 8-30-89  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 75

From	To	Estimated Flow Rate	SWL
45	55	40	18

(12) WELL LOG:

Material	Ground elevation		SWL
	From	To	
Brown clay	0	9	
Red claystone	9	14	
Gray basalt	14	45	
Broken brown basalt	45	55	WB

Date started 8-30-89 Completed 8-30-89

(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.

WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ 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.

WWC Number 1218  
Signed Patrick Wallace Date 9-2-89



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for
Well ID Number

RECEIVED

AUG 07 2017

WATER RESOURCES DEPT
SALEM, OREGON

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name (please print): US Bureau of Land Management
Mailing Address: 28910 US-20
City, State, Zip: Hines, OR 97738
Mail Well ID Tag to: [ ] SAME AS ABOVE [ ] In Care Of (C/O)
Name & Address:
City, State, Zip:

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 32.5S (North / South) Range: 33E (East / West) Section: 33
Tax Lot: 1200 County Harney SE 1/4 NE 1/4
GPS Coordinates: 42.71922, -118.62425
Street Address of Well, City:
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Please fill out as completely as possible)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Campground
Date Well Constructed (or property built): 8/30/1989 Total Well Depth: 55 Casing Diameter: 6
Owner at time the well was constructed (if known): US BLM
Other Information:

SUBMITTED BY (please print): Darrick E. Boschmann
PHONE: 503-986-0853 EMAIL &/or FAX: darrick.e.boschmann@oregon.gov

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

8-7-17

Well Log Number:

HARN 1656

Well Identification #:

L-95061