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

1879

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(START CARD) # 20911

(1) OWNER: Well Number: 2	(9) LOCATION OF WELL by legal description:
Address force Villay Buch Biley OFE	County Hay navitude Longitude
City Buyns State Oragon Zip 97120	Township 225 Mor S. Range 52 / E Early WM
(2) TYPE OF WORK:	Section 33 NE 1/4 NW 1/4 Tax Lot 2200 Lot Block Subdivision
New Well Deepen Recondition Abandon	Street Address of Well (or nearest address)
(3) DRILL METHOD	Society Address of Well for hearest address)
Rotary Air Rotary Mud Cable	(10) STATIC WATER LEVEL:
Other	
(4) PROPOSED USE:	Artesian pressure lb. per square inch. Date
☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation	(11) WATER BEARING ZONES:
☐ Thermal ☐ Injection ☐ Other	Depth at which water was first found
(5) BORE HOLE CONSTRUCTION:  Special Construction approval Yes No Depth of Completed Well 500 ft.	From To Estimated Flow Rate SWL
Special Construction approval Yes No Depth of Completed Well $500$ ft. Yes No	16 Estimated Flow Rate SWI
Explosives used  TypeAmount	200' 209' 200 GPM 14'
HOLE SEAL Amount	460' 475' 400 GPM
Diameter From To Material From To sacks or pounds	<b>1</b>
16" 0 30 Coment 0 30'	(12) WELLLOG: Ground elevation 4200
14/30 500	Material From To SWL
	Top Soil (Sandy) 0 5
How was seal placed: Method A B C D ŽE	sand stone 59
U Other ft. to ft. Material	C/24 Brow 9 35
Gravel placed fromft. toft. Size of gravel	C/ay STone 200 260
(6) CASING/LINER:	Grav C. (2V 260 300
Diameter From Toy Gauge Steel Plastic Welded Threaded	Clay with sand 300 360
Casing: 13" + 1.8 180.6 .250 \	Clay with courses 3366 400
	Clay & Course sand 400 460
	Gray Clay 466 500
Liner:	
	·
Final location of shoe(s) /OB, iq	MESS AND I
(7) PERFORATIONS/SCREENS:	
Perforations Method	
Streens Type Material Slot Tele/pipe	= 14/11 7 (99)
From To size Number Diameter size Casing Liner	
	AN HUMBERGER TO FINDS
	The state of the s
	Date started 3 - 10 - 91 Completed 4-4-13-91
	(unbonded) Water Well Constructor Certification:
(8) WELL TESTS: Minimum testing time is 1 hour	I certify that the work I performed on the construction, alteration,
Pump Bailer Air Artesian	abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my be
Yield gal/min Drawdown Drill stem at Time	knowledge and belief.
1 hr.	WWC Number
500GPM-240' 8 Los	Signed Date
	(bonded) Water Well Constructor Certification:
Temperature of water Depth Artesian Flow Found	I accept responsibility for the construction, alteration, or abandonme work performed on this well during the construction dates reported aboye-
Was a water analysis done? Yes By whom	work performed during this time is in compliance with Ore-
Did any strata contain water not suitable for intended use?  Too little	construction standards. This report is true to the best of my
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other	Signed Jac Valenting Date 4
Depth of strata:ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECO	ND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER

## For Official Use Only:

Received Date:

County Well Log ID# HARM

Well Identification Tag #

## WELL IDENTIFICATION APPLICATION FORM

WELL IDENTIFICATION APPLICATION FORM
WELL IDENTIFICATION APPLICATION FORM  RECEIVED  JUL A
Name: Andy Cost  Mailing Address: HC 73 174 HArney Road  WATER HESOLUTIONS  Mailing Address: HC 73 174 HArney Road
Mailing Address: HC 73 174 HArney Road
City: Burns State: OR Zip: 97720 Phone: (541) 493-3645
WELL LOCATION:
County: HArney Owner's Well Number:
Township: <u>22</u> 質 or S, Range: <u>32</u> E or 駅, Section: <u>30</u> <u>5</u> <u>5</u> 1/4 <u>NF</u> 1/4
Tax Lot Number: Type of Well: water supply monitoring
Street Address of Well (if different from above):
WELL INFORMATION: (do not complete remainder of application if well log is available)
Start Card Number: Approx. Construction Date:
Well Constructor: Joe Valentine
Name of Owner at Time of Construction:
Well Depth (in feet): Static Water Level (in feet):
Diameter of Exposed Well Casing (in inches):
Does this well have a formal water right associated with it? Yes: No:
If Yes: Application #: 6-14678 Permit #: 6-13539 Certificate #:
Please Return Completed Form to:  Well Identification Program  Oregon Water Resources Department  158 12th Street NE  Salem, OR 97310