

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

**Harn HARN 1913**  
 1913 JAN 31 1992

25S/34E/31  
 (START CARD) # W-30657

(1) OWNER: Well Number: **WATER RESOURCES DEPARTMENT**  
 Name **TONY HACKETT**  
 Address **PO BOX 817**  
 City **CRANE** State **ORE** Zip **97720**

(9) LOCATION OF WELL by legal description:  
 County **HARNEY** Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township **25** N of S Range **34** E of W. WM.  
 Section **31** 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
 Tax Lot **2500** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) **HC73-3284**

(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 \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval Yes  No  Depth of Completed Well **270** ft.  
 Explosives used Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Amount	
Diameter	To	Material	From	To	sacks or pounds
16"	0	BENTONITE	0	20'	24 sacks
12"	20	<del>BENTONITE</del>	<del>0</del>	<del>20'</del>	<del>24 sacks</del>
<del>12"</del>	<del>20</del>	<del>BENTONITE</del>	<del>0</del>	<del>20'</del>	<del>24 sacks</del>

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	0	270	1/4"	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of sheets) **210'**

(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"/>

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
100	40'	70'	1 hr.
800	50'	70'	3 hr.
1200	50'	70'	10 hr.

Temperature of water **54** 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:  
**35'** ft. below land surface. Date **5/13/91**  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
30	31	20 GPM	20'
84	86	150 GPM	20'
200	201	150 GPM	20'
260	270	1200 GPM	35'

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
HARD PAN	0	30	-
SAND	30	31	20
BLACK CLAY	31	34	20
BLACK SAND, SHELS	84	86	20
BLACK CLAY	86	110	20
GREEN CLAY	110	120	20
YELLOW SAND Stone	120	200	20
BROWN SAND	200	201	20
BROWN CLAY	201	250	20
BLUE CLAY	250	255	20
ROCK CORRAL ROCK	255	260	20
GRAVEL, RIVER ROCK	260	270	35'

Date started **4/25/90** Completed **5/13/91**

(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 \_\_\_\_\_  
 Signed **Tony Hackett** Date **5/15/91**



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.oregon.gov/owrd

Application for
Well ID Number

RECEIVED

APR 06 2022

OWRD

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

I. OWNER INFORMATION

Current Owner Name (please print): Justin & Stephanie Bowen
Mailing Address: 55288 Hwy 78
City, State, Zip: Burns, OR 97720
Mail Well ID to: [X] 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: 25S (North / South) Range: 34E (East / West) Section: 31 SW 1/4 of the SW 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 2500 County Harney
GPS Coordinates: 43° 20.55.26' N - 118° 35' 21.24 W
Street Address of Well, City: Hwy 78 Crane, OR
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation
Date Well Constructed (or property built): 5/13/91 Total Well Depth: 270' Casing Diameter: 12"
Owner at time the well was constructed (if known): Tony Hackett Well Report # (if known): HARN 1913
Other Information:

SUBMITTED BY (please print): Denise Montgomery, All Points Engr & Surveying, Inc
PHONE: 541-548-5833 EMAIL &/or FAX: neecee@apeands.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

4-6-22

Well Report Number:

HARN 1913

Well Identification #:

L-146830