

RECEIVED

DEC 15 1997

harn
50241

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

WATER RESOURCES DEPT. WELL I.D. # L 116814
SALEM, OREGON START CARD # 098474

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

(1) OWNER: Well Number _____

Name Andy Root
Address PO Box 3
City Burns State OR Zip 97720

(2) TYPE OF WORK

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 450 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
18	0	19	bentonite	0	18	20 sacks

How was seal placed: Method A B C D E

Other poured dry and tamped
Backfill placed from _____ ft. to _____ ft. Material _____

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

(6) CASING/LINER:

Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
Casing: 14	+1	120	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>
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"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations		Screens		Material		Casing	Liner
From	To	Slot size	Number	Diameter	Tele/pipe size		
						<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

<input type="checkbox"/> Pump	<input checked="" type="checkbox"/> Bailer	<input type="checkbox"/> Air	<input type="checkbox"/> Flowing
Yield gal/min	Drawdown	Drill stem at	Artesian Time
100	2		1 hr.

Temperature of water 58 Depth Artesian Flow Found _____

Was a water analysis done? No Yes By whom _____

Did any strata contain water not suitable for intended use? No Too little

Salty Muddy Odor Colored Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Harney Latitude _____ Longitude _____
Township 22S N or S Range 32 1/2 E E or W. WM.
Section 34 NE 1/4 SW 1/4
Tax Lot 2200 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Hwy 20 W

(10) STATIC WATER LEVEL:

25 ft. below land surface. Date 12-3-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 160

From	To	Estimated Flow Rate	SWL
160	410	1000	25

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
sandy loam topsoil	0	1	
clay sand coarse	1	7	
clay brn hard	7	20	
clay brn soft	20	32	
clay grey	32	70	
clay green gravel fine	70	160	
pumice clay brn	160	175	
clay green	175	220	
conglomerate brn	220	243	
clay pink	243	250	
conglomerate brn	250	275	
pumice hard	275	289	
sandstone brn	289	360	
rock brn	360	378	
green conglomerate	378	410	
clay green pumice	410	430	
clay green	430	450	

Date started 11-25-97 Completed 12-3-97

(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 water supply well construction standards. Materials used and information reported above are true to the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 1424

Signed Timothy K. Rieby Date 12-5-97