WATER SUPPLY WELL REPORT WELL I.D. # 4.265 79

(as required by ORS 537.765)

RECEIVED

JAN 22271898D) # 62965

Instructions for completing this report are on the last page of this form.	WATER RESOURCES DECE
(1) OWNER: Well Number = 3	(9) LOCATION OF THE DEPT (9) LOCATION OF THE D
Name Carpenter Canch	County Hanney Latitude Longitude
Address A.O. Box 6 6 7	Township 25 N of SRange 3 / E E or W. WM.
City Sure State One Zip 77720	Section 28 NW 1/4 SE 1/4
(2) TYPE OF WORK	Tax Lot 57 00 Lot Block Subdivision
New Well Deepening Alteration (repair/recondition) Abandonment	Street Address of Well (or nearest address)
(3) DRILL METHOD:	Rd.
Rotary Air Rotary Mud Cable Auger	(10) STATIC WATER LEVEL:
	ft. below land surface. Date
Other	Artesian pressure lb. per square inch. Date
	(11) WATER BEARING ZONES:
Thermal Injection Livestock Other  (5) BORE HOLE CONSTRUCTION:	Depth at which water was first found
Special Construction approval Yes No Depth of Completed Wellft.	· ·
Explosives used Yes No Type Amount	From To Estimated Flow Rate SWL
Nobb	
Diameter From To Material From To Sacks or pounds	
	(12) WELLLOC:
How was seal placed: Method A B C D E	(12) WELL LOG:  Ground Elevation
	Ground Elevation
Other	Material From To SWL
Backfill placed from ft. to ft. Material	Log Revised
Gravel placed from ft. to ft. Size of gravel	due to the wrong
(6) CASING/LINER:	
Diameter From To Gauge Steel Plastic Welded Threaded	of decilina
Casing:	8+ 4-11112
<del></del>	
Liner:	
Final location of shoe(s)	
(7) PERFORATIONS/SCREENS:	
Perforations Method	
Screens Type Material	<u> </u>
Slot Tele/pipe From To size Number Diameter size Casing Lines	.
(8) WELLTESTS: Minimum testing time is 1 hour	Date started Completed
Flowing	(unbonded) Water Well Constructor Certification:
Pump Bailer Air Artesian	I certify that the work I performed on the construction, alteration, or abandonmer
Yield gal/min Drawdown Drill stem at Time	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
1 hr.	and belief.
	WWC Number
	Signed Date
Temperature of water Depth Artesian Flow Found	
	I accept responsibility for the construction, alteration, or abandonment work
11 as a	performed on this well during the construction dates reported above. All work
Did any strata contain water not carried to	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.
Salty Muddy Odor Colored Other	- 1
Depth of strata:	Signed David A. Level WWC Number (5 2/ Date / 1/2 · 98

STATE OF OREGON

WELL I.D.#

WATER SUPPLY WELL REPORT NOV 1 2 1998 (as required by ORS 537.765) (START CARD) # 4 - 26594 Instructions for completing this report TERRESOURCES DEFFOrm
SALEM, UREGON Well Number <u>L-2 65 9 4</u> (1) OWNER: (9) LOCATION OF WELL by legal description: Name Can County Hanne & Latitude Longitude N or Range Address F. 6. Dor W. WM. 910 S W 1/4 5 City Roman Zip 977720 1/4 (2) TYPE OF WORK Tax Lot <u>\$700</u> Lot Block Subdivision New Well Deepening Alteration (repair/recondition) Abandonment Street Address of Well (or nearest address) (3) DRILL METHOD: Rotary Air Rotary Mud Cable (10) STATIC WATER LEVEL: Auger Other 26 ft. below land surface. Date / O (4) PROPOSED USE: Artesian pressure lb. per square inch. Date (11) WATER BEARING ZONES: Domestic ☐ Irrigation Community Industrial Thermal Injection Livestock NOther /es (5) BORE HOLE CONSTRUCTION: Depth at which water was first found Special Construction approval Yes No Depth of Completed Well/45 ft Explosives used Yes No Type Amount **Estimated Flow Rate** SWL HOLE SEAL 1000 26 Diameter Sacks or pounds 3 500 26 98 Bentaite 0 (12) WELL LOG: How was seal placed: Method  $\square$ A □E  $\Box$ B  $\square$ D **Ground Elevation** Other Ain Backfill placed from H. 10 Material Material From То SWL Gravel placed from ft. to ft. Size of gravel (6) CASING/LINER: Diameter To Gauge Steel **Piastic** Welded Threaded **X** ቨ  $\bar{\Box}$ てる Liner: 96 Final location of shoe(s) (7) PERFORATIONS/SCREENS: Perforations Method Torch 140 26 Screens Туре Material Tele/pipe Casing Number Diameter Liner 200  $\square$ П П (8) WELLTESTS: Minimum testing time is 1 hour Date started 10.25 - 7 8 Completed (unbonded) Water Well Constructor Certification: Flowing 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 Pump ☐ Bailer Air Anceian Drill stem at Yield gal/min Drawdown Time 80 1500+ **9** 6 1 hr. and belief. WWC Number Signed Temperature of water \_ 5 4 (bonded) Water Well Constructor Certification: Depth Artesian Flow Found Was a water analysis done? WO Yes By whom I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work Did any strata contain water not suitable for intended use? Too little 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. Salty Muddy Odor Colored Other Depth of strata: WWC Number /5 Z

Signed &

Date 10-29.