

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

JAN 08 1999
 WATER RESOURCES DEPT.
 SALEM, OREGON

HARN
 50381

(START CARD) # 40551

(1) OWNER: Well Number _____
 Name Suntex Ranch
 Address HC 74 - Box 100
 City Riley State Oregon Zip 97759

(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 440 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10	0	30	Bentonite	0	30	80 sks
14	30	440				

How was seal placed: Method A B C D E
 Other dry granulated bentonite
 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	+2	236	25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 236

(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 _____

Yield gal/min	Drawdown	Drill stem at	Time
890	Tested by	Harnsey County	Farm Supply

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 _____

(9) LOCATION OF WELL by legal description:
 County Harnsey Latitude _____ Longitude _____
 Township 235 N or S. Range 70E E or W. WM.
 Section 1E 4 4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 50 ft SW of Section corner

(10) STATIC WATER LEVEL:
152 ft. below land surface. Date 9-6-94
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found: 240

From	To	Estimated Flow Rate	SWL
240	340	350 +	152

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
red clay/gravel	0	14	0
gravel	14	23	
brown clay	23	26	
black rock, broken	26	57	
brown clay/sand	57	61	
red clay/broken rock, black	61	94	
red clay	94	212	
red clay/broken black rock	212	248	
brown clay	248	257	152
black rock, broken	257	323	"
brown sandstone	323	347	"
black rock, occasionally frac	347	359	"
red clay	359	360	"
red cinder	360	361	"
Black rock, occas. fractured	361	440	"

Date started 8-3-94 Completed 9-7-94

(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 773
 Signed John V. Otter Date 11-94