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

WATER RESOURCES DEPT.
SALEM, OREGON

WELL I.D. # L 151722
START CARD # 130112

Harn
50707

Instructions for completing this report are on the back of this form.

(1) LAND OWNER Well Number _____
Name Malheur National Wildlife Refuge
Address HC 72 Box 245
City Princeton State OR Zip 97721

(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 public

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 111 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12	0	30	ben-tonite	0	30	50 sacks
8	30	111				

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	Steel	Plastic	Welded	Threaded
Casing: 8	+2	111	250	<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"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type continuous Material stainless

From	To	Slot size	Number	Slot Diameter	Tele/pipe size	Casing	Liner
88	108	.020		8		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
50	0	100	3 hr.

Temperature of water 55 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom Coffey Labs
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 26S N or S Range 32E E or W. WM.
Section 35 SW 1/4 SE 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Sod House Lane

(10) STATIC WATER LEVEL:
88 ft. below land surface. Date 9-5-01
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 88

From	To	Estimated Flow Rate	SWL
88	107	100	88

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
topsoil			
clay loam/			
cobbles	0	2	
clay yellow	2	5	
cinders multicolor			
/cobbles	5	25	
rock basalt blk	25	70	
clay/claystone yellow	70	86	
cinders blk	86	92	88
rock, basalt blk broken	92	100	88
cinders blk&brn	100	107	88
clay yellow claystone	107	111	88

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SALEM, OREGON

Date started 8-21-01 Completed 9-5-01

(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. Riley Date 9-10-01