

STATE OF OREGON
WATER SUPPLY WELL REPORT

WELL I.D. # L 451734
START CARD # 144595

(as required by ORS 537.765)

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

(1) LAND OWNER Well Number _____
Name Wright, Kathleen Wilber
Address HC #1 Box 8
City Juntura State OR Zip 97911

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
18	0	35	benstone	0	35	50 SACKS
14	35	270				

How was seal placed: Method A B C D E
 Other poored dry; 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: 14	0	60	.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:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
150	8'		1 hr.

Temperature of water 55° 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 20 S N or S Range 35 E E or W. WM.
Section 25 NE 1/4 NE 1/4
Tax Lot 3700 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Drewsey Valley

(10) STATIC WATER LEVEL:
10 ft. below land surface. Date 1-20-02
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 22'

From	To	Estimated Flow Rate	SWL
22	28	50	10
110	252	700	8

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
topsoil, silty loam	0	1	
silt brn	1	8	
clay, sand	8	22	
gravel, med	22	28	10
clay, blue	28	70	
clay brn	70	74	
clay grey	74	110	
claystone	110	160	8
clay claystone grey	160	202	8
claystone grey	202	212	
clay grey	212	230	
vesicular basalt	230	252	
CR. REEIVED	252	270	

Date started 1-8-02 Completed 1-20-02

(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. Pitz Date 01-20-02