

Amended *

Harn 50790

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 41942
START CARD # 131841

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

(1) LAND OWNER

Name Steve Miller Well Number _____
Address HC 73
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 250 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>20"</u>	<u>0</u>	<u>19'</u>	<u>Bentonite</u>	<u>0</u>	<u>19'</u>	<u>41</u>
<u>14"</u>	<u>19'</u>	<u>250'</u>				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☐ Other pouredBackfill 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:	<u>14"</u>	<u>71</u>	<u>27.250</u>	☒	☐	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☐ Outside ☐ None

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>20 GPM</u>	<u>To dry</u>		<u>1 hr.</u>

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: 5'

(9) LOCATION OF WELL by legal description:

County Harness Latitude _____ Longitude _____
Township 25 N or S Range 32 E or W. WM.Section 2 NE 1/4 NE 1/4Tax Lot 400 Lot _____ Block _____ Subdivision _____Street Address of Well (or nearest address) Highway 78EMP 20

(10) STATIC WATER LEVEL:

12 ft. below land surface. Date 2-6-02

Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 16'

From	To	Estimated Flow Rate	SWL
<u>16'</u>	<u>20'</u>	<u>20 GPM</u>	<u>12</u>

(12) WELL LOG:

Ground Elevation 4200

Material	From	To	SWL
<u>top Soil</u>	<u>0</u>	<u>3</u>	
<u>Brown Clay</u>	<u>3</u>	<u>16</u>	
<u>Sand & water</u>	<u>16</u>	<u>20</u>	<u>12</u>
<u>Brown Clay</u>	<u>20</u>	<u>45</u>	
<u>Gray Clay</u>	<u>45</u>	<u>250'</u>	

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MAR 15 2004

Temp. Abandonment WATER RESOURCES DEPT
SALEM, OREGONDate started 2-6-02 Completed 3-20-02

(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.

Signed _____ WWC Number _____
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.

Signed Kenneth E Smith WWC Number 1252
Date 4-14-02

