

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

 WELL I.D. # L 53105
 START CARD # W 144847

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

 (1) LAND OWNER Well Number 1
 Name Donald W Hines
 Address P.O. BOX 124
 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 200 ft.
 Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
18"	0	24'	Cement	24'	15'	70
12"	24'	200	Benitexite	15'	0'	19

 How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☒ E
☐ Other _____

 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:	12"	+1'	139'	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

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

 (7) PERFORATIONS/SCREENS:
☒ Perforations Method Hand Torch
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60'	139'	4x3	1320	12"		☒	☐
						☐	☐
						☐	☐
						☐	☐

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

☒ Pump	☐ Bailer	☐ Air	Flowing
Yield gal/min	Drawdown	Drill stem at	Artesian
1200			
1200	56'		18

 Temperature of water 56 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 Harney Latitude _____ Longitude _____
 Township 23 N or S Range 32 E or W. WM.
 Section 11 NW 1/4 SW 1/4
 Tax Lot 800 Lot _____ Block _____ Subdivision _____

 Street Address of Well (or nearest address) 158 mi. South of Hwy 20 on Rehl Rd.

 (10) STATIC WATER LEVEL:
33' ft. below land surface. Date 4-3-02
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 34'

From	To	Estimated Flow Rate	SWL
34'	48'	20 GPM	
56'	134'	800 GPM	
157'	171'	500 GPM	

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
TOP SOIL	0	2'	
BROWN CLAY	2'	34'	
BROWN SAND	34'	48'	
BROWN CLAY	48'	56'	
BLUE CLAY - small grain	56'	134'	
COARSE SAND - pumice	134'	171'	
BROWN CLAY	171'	200'	

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SEP 25 2002

WATER RESOURCES DEPT.
SALEM, OREGONDate started 8-6-02 Completed 9-3-02

(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 George Valentine WWC Number 1675 Date 9-3-02