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STATE OF OREGON MAY 14 2003

WATER SUPPLY WELL REPORT (as required by ORS 537.700) WATER RESOURCES DEPT SALEM, OREGON

WELL I.D. # L 153705 START CARD # 153705

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

(1) LAND OWNER Name: C. O. O'Connell, Well Number: 124601, Address: 70223 3rd St, City: Riley, State: OR, Zip: 97758

(2) TYPE OF WORK: [X] New Well, [] Deepening, [] Alteration (repair/recondition), [] Abandonment

(3) DRILL METHOD: [X] Rotary Air, [] Rotary Mud, [] Cable, [] Auger, [] Other

(4) PROPOSED USE: [] Domestic, [] Community, [] Industrial, [X] Irrigation, [] Thermal, [] Injection, [] Livestock, [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No, Depth of Completed Well: 640 ft., Explosives used [] Yes [X] No

Table with columns for HOLE Diameter (20, 16, 11, 8 inches) and SEAL Material (0, 136, 275, 520, 640), Sacks or pounds (72)

How was seal placed: Method [] A [] B [X] C [] D [] E, Backfill placed from 0 ft. to 136 ft., Gravel placed from 136 ft. to 275 ft.

(6) CASING/LINER: Table with columns for Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Drive Shoe used [] Inside [] Outside [] None, Final location of shoe(s):

(7) PERFORATIONS/SCREENS: Table with columns for From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour, Yield gal/min: 800+, Drawdown: 640, Drill stem at: 640, Time: 4 hr.

Temperature of water: 62, Depth Artesian Flow: 640, Was a water analysis done? [] Yes [] No, Did any strata contain water not suitable for intended use? [] Too little, [] Salty, [] Muddy, [] Odor, [] Colored, [] Other

(9) LOCATION OF WELL by legal description: County: HARNEY, Township: 23 N or S Range: 25 E or W. WM., Section: 10 NE 1/4 NE 1/4, Tax Lot: 400, Lot: , Block: , Subdivision: , Street Address of Well (or nearest address): 70223 3rd St, Riley, OR 97758

(10) STATIC WATER LEVEL: 172 ft. below land surface, Date: 4-18-03, Artesian pressure: lb. per square inch, Date:

(11) WATER BEARING ZONES: Table with columns for From, To, Estimated Flow Rate, SWL

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(12) WELL LOG: Ground Elevation: WATER RESOURCES DEPT SALEM, OREGON

Table with columns for Material, From, To, SWL

Date started: 2-21-03, Completed: 4-16-03

(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.

(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.

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

APR 18 2005 HARN 50948
 WATER RESOURCES DEPT
 SALEM, OREGON

WELL I.D. # L
 START CARD # 153705

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

(1) LAND OWNER
 Name Gordon Perlot Well Number _____
 Address 70223 BEST LN
 City Riley State OR Zip 97758

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

HOLE		SEAL					
Diameter	From	To	Material	From	To	Sacks or pounds	
20"	0	136					
16"	136	275					
11"	275	520					
8"	520	640					

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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"/>

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
						<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
			1 hr.

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 HARNEY Latitude _____ Longitude _____
 Township 23 N or S Range 25 E or W. WM.
 Section 10 NE 1/4 NE 1/4
 Tax Lot 400 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 70223 BEST LN
Riley OR 97758

(10) STATIC WATER LEVEL:
172 ft. below land surface. Date 4-18-03
 Artesian pressure _____ lb. per square inch Date _____

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

From	To	Estimated Flow Rate	SWL
224	228	50 gal	172
260	280	800 gal	172

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Brown Lava Rock	326	330	
Red Lava Rock	330	332	
Green Lava Rock	332	340	
Red Lava Rock	340	383	
Green Lava Rock	383	390	
Fractured Rock	390	405	
Red Lava Rock	405	430	
Brown Lava Rock	430	510	
Red Lava Rock	510	590	
Pumice	590	630	
Red Kaibab	630	640	

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Date started _____ Completed _____

(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 1654
 Signed [Signature] Date 5-4-03