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APR 29 2004

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT
SALEM, OREGONWELL I.D. # L L65249
START CARD # 162593

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

(1) LAND OWNER

Name Earl Barber

Well Number _____

Address PO Box 961City BurnsState ORZip 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 242 ft.Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE

SEAL

Diameter From To Material From To Sacks or pounds

18 0 20 benite 0 20 30 sacks14 20 242 _____How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other packed 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 +1 80.250 ☒ ☐ ☒ ☐☐ ☐ ☐ ☐ ☐ ☐☐ ☐ ☐ ☐ ☐ ☐☐ ☐ ☐ ☐ ☐ ☐☐ ☐ ☐ ☐ ☐ ☐☐ ☐ ☐ ☐ ☐ ☐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/pipes size Casing Liner

☐ ☐☐ ☐☐ ☐☐ ☐

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

☐ Pump☒ Bailer☐ AirFlowing ☐ Artesian

Yield gal/min

Drawdown

Drill stem at

Time

10001 hr.Temperature of water 62° Depth Artesian Flow Found _____Was a water analysis done? ☒ No ☐ 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 22 S N or S Range 32 E E or W. WM.Section 34 SE 1/4 SE 1/4Tax Lot 500 Lot _____ Block _____ Subdivision _____Street Address of Well (or nearest address) Hwy 20 East

(10) STATIC WATER LEVEL:

17 ft. below land surface.Date 4-23-04

Artesian pressure _____ lb. per square inch

Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 31

From	To	Estimated Flow Rate	SWL
<u>31</u>	<u>242</u>	<u>1000</u>	<u>17</u>

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
<u>topsoil clay loam</u>	<u>0</u>	<u>1</u>	
<u>clay brn</u>	<u>1</u>	<u>20</u>	
<u>clay grey</u>	<u>20</u>	<u>31</u>	
<u>sand fine blk</u>	<u>31</u>	<u>45</u>	<u>17</u>
<u>clay gravel brn</u>	<u>45</u>	<u>56</u>	<u>17</u>
<u>sand brn fine</u>	<u>56</u>	<u>70</u>	<u>17</u>
<u>sand clay conglomerate</u>	<u>70</u>	<u>104</u>	<u>17</u>
<u>clay yellow</u>	<u>104</u>	<u>110</u>	<u>17</u>
<u>conglomerate</u>	<u>110</u>	<u>115</u>	<u>17</u>
<u>clay brn</u>	<u>115</u>	<u>130</u>	<u>17</u>
<u>no cottings</u>	<u>130</u>	<u>180</u>	<u>17</u>
<u>pumice grey</u>	<u>180</u>	<u>236</u>	<u>17</u>
<u>pumice grey</u>	<u>236</u>	<u>241</u>	<u>17</u>
<u>rock grey</u>	<u>241</u>	<u>242</u>	<u>17</u>

Date started 4-16-04 Completed 4-23-04

(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 1424Signed Timothy K. Rely Date 4-27-04