HARN 51141

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

WELL I.D. # L 71070

START CARD # 171203

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

(1) LAND OWNER Well Number _____
Name Lynn Deguire
Address PO Box
City Crane State OR Zip 97732

(2) TYPE OF WORK ☑ New Well
☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion

(3) DRILL METHOD
☑ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Other _____

(4) PROPOSED USE
☐ Domestic ☐ Community ☐ Industrial ☑ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☑ No
Depth of Completed Well 85 ft.
Explosives used: ☐ Yes ☑ No Type _____ Amount _____

BORE HOLE Diameter	From	To	SEAL Material	From	To	Sacks or Pounds
18	0	18	bentonite	0	18	20 sacks
12	18	85				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☑ Other poured dry and 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	+1.5	20	.250	☑	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
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
☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
1000		85	1hr

Temperature of water 57 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 (legal description)
County Harney
Tax Lot 2500 Lot _____
Township 26S N or S Range 29E E or W WM
Section 23 SE 1/4 NW 1/4
Lat ___° ___' ___" or _____ (degrees or decimal)
Long ___° ___' ___" or _____ (degrees or decimal)
Street Address of Well (or nearest address) Double "OO" Rd-N. Harney Lake

(10) STATIC WATER LEVEL
36 ft. below land surface. Date 1-24-05
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 48

From	To	Estimated Flow Rate	SWL
48	81	1000	36

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
topsoil clay cobbles	0	2	
clay brn	2	3	
rock grey basalt	3	48	
rock grey broken	48	67	36
vasecular basalt/gravels red brn	67	81	36
claystone brown	81	85	36

RECEIVED
JAN 31 2005
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 1-20-05 Completed 1-24-05

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, 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 _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, 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 Date 1-27-05

Signed Timothy K. Riley

ORIGINAL – WATER RESOURCES DEPARTMENT FIRST COPY – CONSTRUCTOR SECOND COPY – CUSTOMER 06/16/2004