

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

HARN 51259
WELL I.D. # L 83522
START CARD # 185167

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

(1) LANDOWNER Well Number #6
Name Travis Singhose
Address 29327 Weaver Springs LN
City Burns State OR Zip 97720

(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 207 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
22"	0	24'	Cement	0	21'	1.5 Sacks
16"	24'	130'				
12"	130'	207'				

How was seal placed: Method A B C D E
 Other poured
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Casing:	Diameter	From	To	Gauge	Steel				Plastic		Welded Threaded	
					0.025	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	16"	0	90'									

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

(7) PERFORATIONS/SCREENS
 Perforations Method Mill Knife
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
60'	80'	1/2x3	16/ft			<input checked="" 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
335 gal	@ 86'	35 min recovery	35 min recovery

Temperature of water 57° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata conditions make the well unsuitable for intended use? No Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL (legal description)
County Harney
Tax Lot 2900 Lot _____
Township 25S N or S Range 30E E or W WM
Section 28 NE 1/4 NE 1/4
Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 29327 Weaver Springs LN Burns OR 97720

(10) STATIC WATER LEVEL
43' ft. below land surface. Date 2-12-06
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

From	To	Estimated Flow Rate	SWL
58'	78'	335	

(12) WELL LOG

Material	From	To	SWL
TOP Soil	0	8'	
Clay - Sand mix Brown	8'	45'	
Blue clay	45'	50'	
Sand Stone Tan	50'	55'	
Brown Clay	55'	58'	
Sand Stone	58'	78'	
Clay - Tan	78'	82'	
Clay - Brown	82'	85'	
Sand Stone Tan	85'	92'	
Sand Stone Brown	92'	108'	
Clay Stone - Tan	108'	122'	
Clay - Blue	122'	183'	
Clay - Tan	183'	186'	
Sand Stone - Tan	186'	188'	
Clay - Blue	188'	207'	

Date Started 2-4-06 Completed 2-17-06

(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 _____ Date 2-17-06

Signed Travis Singhose