

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

WELL I.D. # L 693217  
 START CARD # 185150

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

(1) **LAND OWNER** Well Number \_\_\_\_\_  
 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

(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 120 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>existing</u>						
<u>20</u>	<u>75</u>	<u>105</u>				
<u>16</u>	<u>105</u>	<u>120</u>				

How was seal placed: Method  A  B  C  D  E  
 Other existing  
 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"/>
Liner:	<u>16</u>	<u>+1</u>	<u>120-250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) **PERFORATIONS/SCREENS:**  
 Perforations Method \_\_\_\_\_  
 Screens Type rodless Material stainless steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>75</u>	<u>115</u>	<u>.150</u>	<u>contin</u>	<u>16</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
<u>100</u>	<u>0</u>		<u>1 hr.</u>

Temperature of water 57° 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 25S N or S Range 30E E or W. WM.  
 Section 27 SW 1/4 SW 1/4  
 Tax Lot 2400 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) Weaver Springs Rd

(10) **STATIC WATER LEVEL:**  
65 ft. below land surface. Date 7-16-06  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

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

From	To	Estimated Flow Rate	SWL
<u>65</u>	<u>120</u>	<u>1500</u>	<u>65</u>

(12) **WELL LOG:**  
 Ground Elevation \_\_\_\_\_

Material	From	To	SWL
<u>(cleanest)</u>			
<u>Cinders blk</u>	<u>75</u>	<u>115</u>	<u>65</u>
<u>Clay, claystone yellow</u>	<u>115</u>	<u>120</u>	<u>65</u>

Date started 7-10-06 Completed 7-16-06  
**RECEIVED**  
**JUL 20 2006**  
**WATER RESOURCES DEPT**  
**SALEM, OREGON**

(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 Timothy K. Aly WWC Number 1424 Date 7-17-06