

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

HARN 51403

WELL I.D. # L 13668

START CARD # 183976

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 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 150 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
REFER TO Log G-4279 AND G-4028						
	14"	74"	ALready Grouted			

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: 14"00	0	139	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 139 1/2

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

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
79'	139	4x4	2128	1400		<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
50	0		1 Hr.

Temperature of water 51 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 2300 Lot _____
Township 25S N or S Range 30E W or W WM
Section 27 NW 1/4 SE 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 29327 Weaver Springs Ln. Burns, Ore. 97720

(10) STATIC WATER LEVEL
64.3 ft. below land surface. Date 9-21-07
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 68

From	To	Estimated Flow Rate	SWL
139 1/2 68	139 1/2	1200	64.3

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Claved in Brown Clay Congl.	78	78	64.3
W.B. Brown Clay Congl.	78	139	64.3
W.B. Brown Sand Congl.	139	150	
RECEIVED			
Bottom Cave in			
OCT 03 2007			
RECEIVED			
WATER RESOURCES DEPT			
SALEM, OREGON			
DEC 12 2007			
WATER RESOURCES DEPT			
SALEM, OREGON			
Date Started	8-30-07		Completed
		9-21-07	

(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 1255 Date 9-21-07

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 1255 Date 9-21-07

Signed Doug Allen