

HARN
51433

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 86796
START CARD # 1003057

(1) LAND OWNER Owner Well I.D. _____
First Name JETT Last Name BLACKBURN
Company _____
Address 707 PONDEROSA VILLAGE
City BURNS State OR Zip 97720

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

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 260 ft.

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	
12	220	260	existing			

How was seal placed: Method A B C D E

Other existing
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	12		220	260	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia _____ From _____ To _____

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

Perf/S creen	Casing/ Liner	Screen Dia	From	To	Scm/slot width	Slot length	# of slots	Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
100	10		1 hr

Temperature 55 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 24 S N/S Range 32.5 E E/W WM
Sec 30 SE 1/4 of the SE 1/4 Tax Lot 600
Tax Map Number _____ Lot _____
Lat _____ ° 0 ' " or _____ DMS or DD
Long _____ ° 0 ' " or _____ DMS or DD
 Street address of well Nearest address
64040 HWY 78

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+ SWL(ft)
Existing Well / Predeepening	03-06-2008		30
Completed Well	03-07-2008		30

Flowing Artesian? Dry Hole? existing

WATER BEARING ZONES Depth water was first found existing

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(11) WELL LOG Ground Elevation _____

Material	From	To
existing		
clay green	227	250
clay grey	250	260
RECEIVED		
APR 06 2008		
WATER RESOURCES DEPT SALEM OREGON		
RECEIVED		
APR 03 2008		
WATER RESOURCES DEPT SALEM OREGON		
RECEIVED		
MAR 10 2008		
WATER RESOURCES DEPT SALEM OREGON		

Date Started 03-06-2008 Completed 03-07-2008

(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.

License Number _____ Date _____
Password : (if filing electronically) _____
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.

License Number 1424 Date 03-07-2008
Password : (if filing electronically) *****
Signed _____
Contact Info (optional) _____

