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

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HARN 514	136
51430	

WELL LABEL # L 8 3202

START CARD # [ 100 3121

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
First Name left Last Name Blackburn	County Harney Twp 25 S N/S Range 31E E/W WM
Company	Sec 27 NE 1/4 of the NU 1/4 Tax Lot iv
Address 707 PERADROSA VILLAGE	Tax Map Number Lot
City BUTOS State OR Zip 97720	Lat ° 0 ' " or DMS or DD
	Long °0 ′ ″ or DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Street address of well (VNearest address
Alteration (repair/recondition)	
(3) DRILL METHOD	15 Lane Hwy 205
Rotary Air Rotary Mud Cable Auger Cable Mud	
Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
	Existing Well / Predeepening 3 - 4-08
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 3-14-08 40
Industrial/Commericial Livestock Dewatering	Flowing Artesian? Dry Hole?
Thermal Injection Other	WATER BEARING ZONES Depth water was first found
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy	•
Depth of Completed Well <u>150</u> ft.	
BORE HOLE SEAL sacks/	
Dia From To Material From To Amt Ibs	
12 133 151 OXISTINO	
	(11) WELL LOG Ground Elevation
	Stould Elevation
How was seal placed: Method A B C D E	Material From To
Other	$e \times 15 \text{ mod}$ 0 133
Backfill placed from ft. to ft. Material	clay green 133 150
Filter pack from ft. to ft. Material Size	
Explosives used: Yes Type Amount	
(6) CASING/LINER	
Casing Liner Dia + From To Gauge Sti Pistc Wid Thrd	
	DPAPILIZE
	RECEIVED RECEIVED
	REGEIVED
Shoe Inside Outside Other Location of shoe(s)	4PR 5 C 2008
Temp casing Yes Dia From To	MAD 9 4 2008
(7) PERFORATIONS/SCREENS	WATER RESUURCES DEPT
Perforations Method	WATER RESOURCES DEPT SALEM OREGON
Screens Type Material	SALEM. OREGON
Perf/S Casing/Screen Scrn/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	Date Started 3-19-08 Completed 3-19-08
Fight Did Fight 10 wider length side pipe size	(nnbonded) 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.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date
Pump 🚫 Bailer 🔿 Air 🔿 Flowing Artesian	Password : (if filing electronically)
Yield gal/min _ Dräwdawn _ Drill stem/Pump depth _ Duration (hr)	
50 11/19/11/19/	(bonded) Water Well Constructor Certification
	I accept responsibility for the construction, deepening, alteration, or abandonmen
50 0 1 hk	
Temperature 59 °F Lab analysis Yes By performed during this time is in compliance with Oregon water s	
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.
From To Description Amount Units	License Number 1424 Date 3-21-08
	Password : (if filing electronically)
	Signed
	Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

ORIGINAL - WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.89

## **HARN 51436**

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

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	WELL LABEL # L	83202
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START CARD # 100 312

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)	
First Name left Last Name Blackburn	County Harney Twp 255 N/S Range 31E E/W WM	
Company	Sec 27 NE 1/4 of the NW 1/4 Tax Lot 100	
Address 707 PRADOMSA VILLAGE	Tax Map Number Lot	
City BUTOS State OR Zip 97720	Lat ° 0 ' " or DMS or DD	
(2) TYPE OF WORK New Well Deepening Conversion	Long <u>° 0 '</u> or DMS or DD	
	C Street address of well (VNearest address	
Alteration (repair/recondition)	15 Lane Hwy 205	
(3) DRILL METHOD	Es dane more cos	
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL	
Reverse Rotary Other	Date SWL(psi) + SWL(ft)	
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening 3_4-08 49 Completed Well 3-16-08 40	
Industrial/Commercial Livestock Dewatering	Flowing Artesian? Dry Hole?	
Thermal Injection Other	WATER BEARING ZONES Depth water was first found	
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy		
Depth of Completed Well <u>150</u> ft.	$\frac{\text{SWL Date}  \text{From}  \text{To}  \text{Est Flow}  \text{SWL(psi)}  +  \text{SWL(ff)}}{1  \text{O}  $	
BORE HOLE SEAL sacks/		
Dia From To Material From To Amt lbs		
2 133 151 EXISTING		
	(11) WELL LOG Ground Elevation	
How was seal placed: Method A B C D E	Material From To	
	$P \times 15 hn A$ 0 133	
Backfill placed from ft. to ft. Material	ciay areen 133 150	
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		
0 12 130 150 250 00 0		
	DEAEN/ED	
	RECEIVED	
Shoe Inside Outside Other Location of shoe(s)		
Temp casing Yes Dia From To	MAR 2 4 2008	
(7) PERFORATIONS/SCREENS		
Perforations Method	WATER RESOURCES DEPT	
Screens Type Material	SALEM. OREGON	
Perf/S Casing/ Screen Scrn/slot Slot # of Tele/	Date Started 3-19-08 Completed 3-19-08	
creen Liner Dia From To width length slots pipe size		
	(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.	
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date	
O Pump O Bailer O Air O Flowing Artesian	Password : (if filing electronically)	
Yield gal/min _ Drawdown _ Drill stem/Pump depth _ Duration (hr) Signed		
(bonded) Water Well Constructor Certification		
I accept responsibility for the construction, deepening, alteration, or abandon		
work performed on this well during the construction dates reported above. All we		
Temperature $59$ °F Lab analysis Yes By performed during this time is in compliance with Oregon water supply construction standards. This report is true to the best of my knowledge and beli		
Water quality concerns? Yes (describe below)	License Number 1424 Date 3-Z1-08	
	Password : (if filing electronically)	
	Signed	
	Contact Info (optional)	

ORIGINAL - WATER RESOURCES DEPARTMENT THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.89