

HARNEY 43437

STATE OF OREGON
WATER SUPPLY WELL REPORT

WELL I.D. # L 76600
START CARD # 1003090

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

(1) LAND OWNER Well Number _____
Name Jett Blackburn
Address 707 Ponderosa Village
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 180 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>12</u>	<u>145</u>	<u>180</u>	<u>existing</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:	<u>12</u>	<u>145</u>	<u>180</u>	<u>.250</u>	<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) _____

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min existing Drawdown 0 Drill stem at _____ Time 1 hr
50

Temperature of water 59° 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 by legal description:
County Harney Latitude _____ Longitude _____
Township 25 S N or S Range 31 E E or W. WM.
Section 28 NE 1/4 NE 1/4
Tax Lot 5800 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) L5 Lane Hwy 205

(10) STATIC WATER LEVEL:
56 ft. below land surface. Date 3-14-08
Artesian pressure _____ lb. per square inch Date 3-15-08

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
<u>existing</u>			

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
<u>existing</u>	<u>0</u>	<u>145</u>	
<u>clay grey</u>	<u>145</u>	<u>175</u>	
<u>clay yellow</u>	<u>175</u>	<u>180</u>	

RECEIVED

MAR 21 2008

RECEIVED

WATER RESOURCES DEPT
SALEM, OREGON

APR 30 2008

WATER RESOURCES DEPT
SALEM, OREGON

Date started 3-14-08 Completed 3-15-08

(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.
WWC Number _____
Signed _____ 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.
WWC Number 1424
Signed [Signature] Date 3-19-08

HARN 51437

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

WELL I.D. # L 76600
 START CARD # 1003090

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

(1) **LAND OWNER** Well Number _____
 Name Jett Blackburn
 Address 707 Ponderosa Village
 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 180 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12	145	180	existing			

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:	12	145	180	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) _____

(7) **PERFORATIONS/SCREENS:**

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
existing			1 hr.

Temperature of water 59° 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 by legal description:**
 County Harney Latitude _____ Longitude _____
 Township 25 S N or S Range 31 E E or W. WM.
 Section 28 NE 1/4 NE 1/4
 Tax Lot 5800 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) L5 Lane Hwy 205

(10) **STATIC WATER LEVEL:**
56 ft. below land surface. Date 3-14-08
 Artesian pressure _____ lb. per square inch Date 3-15-08

(11) **WATER BEARING ZONES:**

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
<u>existing</u>			

(12) **WELL LOG:**

Ground Elevation _____

Material	From	To	SWL
existing	0	145	
clay grey	145	175	
clay yellow	175	180	

RECEIVED

MAR 21 2008

WATER RESOURCES DEPT
 SALEM, OREGON

Date started 3-14-08 Completed 3-15-08

(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 [Signature] WWC Number 1424 Date 3-19-08