

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

WELL I.D. # L 93553

START CARD # 197390

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

(1) LAND OWNER Well Number _____
Name Tom KETSCHER
Address PO Box 717
City HINES State OR Zip 97738

(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 218 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL		
Diameter	From	To	Material	From	To
<u>16"</u>	<u>0</u>	<u>195</u>	<u>EXISTING SEAL</u>	<u>0</u>	<u>195</u>
			<u>NOT DISTURBED</u>		

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
Casing: Diameter 16" From 0 To 190 Gauge 28
EXISTING
Liner: _____
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"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 1000 Drawdown _____ Drill stem at 100 Time 1h.

Temperature of water 58 Depth Artesian _____
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 600 Lot _____
Township 25 N of S Range 28 E or W WM
Section 21 NW 1/4 SE 1/4

(10) STATIC WATER LEVEL
12 1/2 ft. below land surface. Date 5-04-08
12 1/2 ft. below land surface. Date 5-06-08
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found N/A

From	To	Estimated Flow Rate	SWL
<u>NO WELL LOG FOUND FOR THIS WELL</u>			<u>12 1/2'</u>

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
<u>BROKEN CLAYSTONE WITH GRAVEL-SAND</u>	<u>195</u>	<u>220</u>	<u>12 1/2'</u>

RECEIVED
JUL 14 2008
WATER RESOURCES DEPT
SALEM, OREGON
Date Started 5-05-08 Completed 5-06-08

(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 _____ Date _____

(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 1355 Date 5-06-08
Signed Arthur L Jay

RECEIVED
MAY 21 2008

WATER RESOURCES DEPT
SALEM, OREGON