

HARN 51512

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## STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 98093

START CARD # 200510

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

**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_  
 First Name MONTE + MARY Last Name CARPENTER  
 Company \_\_\_\_\_  
 Address 29328 WEAVER SPRINGS LN  
 City BURNS State OR Zip 97728

**(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  Injection  
 Thermal  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard:  Yes (attach copy)  
 Depth of Completed Well 110 ft.

BORE HOLE			SEAL			Amount	Scks/lbs
Dia	From	To	Material	From	To		
12"	0	97	EXISTING SEAL				
10 5/8"	97	120	UNDISTURBED				

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
 Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(6) CASING/LINER**

Csng	Lnr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
✓		12"		EXISTING CASING UNDISTURBED						

Shoe  Inside  Outside  Other Location of shoe(s) \_\_\_\_\_  
 Temporary casing  Yes Diameter \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf	Scr	Csng	Lnr	Screen Dia	From	To	Screen/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 1000 Drawdown \_\_\_\_\_ Drill stem/Pump depth 110' Duration (hr) 1h

Temperature 52 °F Lab analysis  Yes  No  
 Water quality concerns?  Yes (describe below) \_\_\_\_\_

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**  
 County HARNEY Twp 25 N or S S Range 30 E or W W.M.  
 Sec 33 NW 1/4 of the NW 1/4 Tax Lot 3900  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street Address of Well (or nearest address) 29328 WEAVER SPRINGS LN

**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Predeepening	<u>12-10-08</u>			<u>58'</u>
Completed Well	<u>12-10-08</u>			<u>58'</u>

Flowing Artesian?  Yes Dry Hole?  Yes

**WATER BEARING ZONES** Depth water was first found UNKNOWN

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>12-10-08</u>	<u>70</u>	<u>120</u>	<u>1000+</u>			<u>58'</u>

**(11) WELL LOG** Ground Elevation \_\_\_\_\_

Material	From	To
<u>CINDERS - SAND (CLEAN CUT)</u>	<u>70</u>	<u>97</u>
<u>CINDERS</u>	<u>97</u>	<u>104</u>
<u>LAVA ROCK</u>	<u>104</u>	<u>119</u>
<u>BOTTOM 9' FILLED WITH CINDERS</u>		

**RECEIVED**  
 JAN 26 2009  
 WATER RESOURCES DEPT  
 SALEM, OREGON

Date Started 12-10-08 Completed 12-10-08

**(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.

License Number \_\_\_\_\_ Date \_\_\_\_\_  
 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 1355 Date 12-10-08  
 Signed Arthur L. Jay  
 Contact Info. (optional) \_\_\_\_\_

**RECEIVED**  
 DEC 26 2008