

# HARN 51532

**STATE OF OREGON  
WATER SUPPLY WELL REPORT**

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

WELL LABEL # L 98098

START CARD # 199655

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

**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_  
 First Name FRED Last Name TEUTSCH  
 Company \_\_\_\_\_  
 Address 70112 N. NEWTON RD.  
 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  Injection  
 Thermal  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard:  Yes (attach copy)  
 Depth of Completed Well 300 ft.

BORE HOLE			SEAL			
Dia	From	To	Material	From	To	Scks/lbs
20"	0	98	BENTONITE	0	50	78 Scks

How was seal placed: Method  A  B  C  D  E  
 Other POURED DRY  
 Backfill placed from 50 ft. to 98 ft. Material BENTONITE  
 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
✓		14"	+	2	98	.250	✓		✓	

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

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

Perf	Scrn	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 2000+ Drawdown 290 Drill stem/Pump depth 1 1/2 h. Duration (hr) \_\_\_\_\_

Temperature 51 °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 23 N of S Range 32 W of W.M.  
 Sec 13 SW 1/4 of the SW 1/4 Tax Lot 1200  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street Address of Well (or nearest address) 70112 N. NEWTON RD

**(10) STATIC WATER LEVEL**

Existing Well/Predeepening	Date	SWL (psi)	+	SWL (ft)
Completed Well	<u>2-11-09</u>		-	<u>14'</u>

Flowing Artesian?  Yes Dry Hole?  Yes

**WATER BEARING ZONES** Depth water was first found 17'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>2-03-09</u>	<u>-17'</u>	<u>18'</u>	<u>7 gpd</u>		-	<u>13</u>
	<u>35</u>	<u>300</u>	<u>2000+</u>		-	<u>14</u>

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

Material	From	To
CLAY LOAM TOPSOIL	0	3
BROWN CLAY	3	10
SANDY BROWN CLAY	10	17
BROWN CLAY	17	25
GRAY CLAY - SAND LAYERS	25	95
FRACTURED BLACK SANDSTONE	95	155
BROWN CLAY	155	160
FRACTURED BLACK SANDSTONE	160	178
FRACTURED BROWN CLAYSTONE	178	195
FRACTURED BLACK SANDSTONE	195	248
GRAY PUMICE STONE	248	300

Date Started 2-03-09 Completed 2-11-09

**(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 1739 Date 2-11-09  
 Signed James Jay

**(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 2-11-09  
 Signed Arthur Jay  
 Contact Info. (optional) \_\_\_\_\_

**RECEIVED**  
 FEB 17 2009