

Harn
51555

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

WELL I.D. # L 38946

START CARD # W198686

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

(1) **LAND OWNER** Well Number _____
Name CarpenTer Ranch LLC
Address 1930 Lewis Street
City Salem State Or Zip 97301

(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 300 ft. = 320
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
30"	0	20	BENBILT	0	20	120 SACKS
12"	20	320				

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	From	To	Gauge	Steel				Plastic					
					Welded	Threaded	Welded	Threaded	Welded	Threaded				
	12"	0	230	260	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 230'

(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	Drawdown	Drill stem at	Time
1400	20'		3 Hrs.

Temperature of water 54.0 Depth Artesian Flow Found _____
Was a water analysis done? Yes By who _____
Did you test for nitrate? Yes No Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) **LOCATION OF WELL (legal description)**
County HARNEY
Tax Lot none Lot _____
Township 25 N or S Range 31 E or W WM
Section 31 SW 1/4 NW 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) _____

(10) **STATIC WATER LEVEL**
57.5 ft. below land surface. Date 3/20/09
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) **WATER BEARING ZONES**
Depth at which water was first found 90' 85'

From	To	Estimated Flow Rate	SWL
85'	130'	100 Gal.	80'

(12) **WELL LOG** Ground Elevation _____

Material	From	To	SWL
TOP SOIL	0	2	
Hard pan	2	15	
Sandstone	15	40	
Cinders & Clay	40	48	
Black cinders	48	85	
Blue clay & cinders	85	90	
Sandstone	90	100	80'
Cinders & Clay	100	125	80
Blue Clay	125	130	80
Black Clay	130	230	80
CINDERSTONE	230	320	57'

Date Started 10/14/08 Completed 3/20/09

(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.

WWC 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.

WWC Number 1336 Date 4/14/09

Signed [Signature]

RECEIVED
MAY 14 2009
RECEIVED
APR 23 2009