

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

06-02-2009

WELL LABEL # L 88105

START CARD # 185604

(1) LAND OWNER Owner Well I.D. \_\_\_\_\_

First Name Tim Last Name Clemens
Company
Address 235 Hwy 20 N
City Hines State OR Zip 97738

(2) TYPE OF WORK [X] New Well [ ] Deepening [ ] Conversion
[ ] Alteration (repair/recondition) [ ] Abandonment

(3) DRILL METHOD

[ ] Rotary Air [ ] Rotary Mud [X] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE [ ] Domestic [X] Irrigation [ ] Community

[ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION Special Standard [ ] (Attach copy)

Depth of Completed Well 200.00 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 20, 0, 20, Cement, 0, 19, 74, S.

How was seal placed: Method [ ] A [ ] B [X] 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

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Row 1: [X], [ ], 14, 1, 20, .250, [X], [ ], [ ], [ ].

Shoe [ ] Inside [ ] Outside [ ] Other Location of shoe(s) \_\_\_\_\_

Temp casing [ ] Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS

Perforations Method factory
Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Table with columns: Perf/S creen, Casing, Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Row 1: Perf, Casing, 14, 20, 80, .25, 3, 2.880.

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

[X] Pump [ ] Bailer [ ] Air [ ] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 300, 140, 160, 8.

Temperature 56 °F Lab analysis [ ] Yes By \_\_\_\_\_

Table with columns: From, To, Description, Amount, Units. Row 1: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County Harney Twp 23.00 S N/S Range 31.00 E E/W WM
Sec 1 NW 1/4 of the NW 1/4 Tax Lot 400
Tax Map Number 1-2 Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
[X] Street address of well [ ] Nearest address

Head east on hywy 20 from Burns, on the right after Sand Hill

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Row 1: Existing Well / Predeepening, , , . Row 2: Completed Well, 05-28-2008, , 22.

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES

Depth water was first found 34

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 05-28-2008, 34, 200, 300, , 22.

(11) WELL LOG

Ground Elevation \_\_\_\_\_

Table with columns: Material, From, To. Row 1: Top Soil, 0, 2. Row 2: Brown Clay, 2, 34. Row 3: Green Clay, 34, 92. Row 4: Gray Clay, 92, 141. Row 5: Green Clay - Fine Sand, 141, 200.

Date Started 05-05-2008 Completed 05-28-2008

(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 \_\_\_\_\_
Electronically Filed
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 1675 Date 06-02-2009
Electronically Filed
Signed GEORGE VALENTINE (E-filed)
Contact Info (optional)