

STATE OF OREGON  
WATER SUPPLY WELL REPORT

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

**HARN 51578**

WELL LABEL # L 100 253

START CARD # 200518

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

(1) LAND OWNER DUSTY Owner Well I.D. \_\_\_\_\_  
 First Name DUSTY Last Name ROBEY  
 Company \_\_\_\_\_  
 Address 38095 COTTONTAIL LN,  
 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 600' ft.

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amount	Scks/lbs
20"	0	38	BENTONITE	0	38	97	SCKS
12 3/4"	38	263					
10"	263	600					

How was seal placed: Method  A  B  C  D  E

Other POURED DRY

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
-	-	14"	+	14"	51'	.250	✓		✓	
-	-	12"	+	20"	263	.250	✓		✓	

Shoe  Inside  Outside  Other Location of shoe(s) 263'

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 650 Drawdown \_\_\_\_\_ Drill stem/pump depth 510' Duration (hr) 1

Temperature 66 °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 24 N of S Range 33 E or W W.M.  
 Sec 03 SW 1/4 of the NW 1/4 Tax Lot 100  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_

Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Street Address of Well (or nearest address) QUINCY RD

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL (ft)
Existing Well/Predeepening	<u>5-27-09</u>		-	<u>29</u>
Completed Well	<u>5-28-09</u>		-	<u>29</u>

Flowing Artesian?  Yes Dry Hole?  Yes  
 WATER BEARING ZONES Depth water was first found 85'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>5-28-09</u>	<u>85</u>	<u>600</u>	<u>900+</u>		-	<u>29'</u>

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

Material	From	To
SEE ORIGINAL WELL REPORT	0	400
BROKEN CLAYSTONE WITH THIN LAYERS OF BLACK LAVA	400	416
BROWN CLAYSTONE	416	420
BROKEN CLAYSTONE WITH THIN ROCK LAYERS	420	553
BLACK FORDONS LAVA	553	555
BROKEN CLAYSTONE WITH ROCK LAYERS	555	570
BROKEN CLAY - CLAYSTONE	570	600

Date Started 5-27-09 Completed 5-28-09

(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 \_\_\_\_\_ 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 5-29-09

Signed Arthur L Jay

Contact Info. (optional) \_\_\_\_\_

RECEIVED

JUN 02 2009

WATER RESOURCES DEPT