

STATE OF OREGON  
**WATER SUPPLY WELL REPORT**  
 (as required by ORS 537.765 & OAR 690-205-0210)

**HARNEY 51699**  
**04-30-2010**

WELL LABEL # L 102511

START CARD # 1009943

**(1) LAND OWNER** Owner Well I.D. Discharge

First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Company Harney Electric Co op  
 Address 1326 Hines Blvd.  
 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  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard  (Attach copy)

Depth of Completed Well 180.00 ft.

BORE HOLE			SEAL		sacks/ lbs		
Dia	From	To	Material	From		To	
10	0	20	Bentonite	0	20	20	S
6	20	180					

How was seal placed: Method  A  B  C  D  E

Other poured dry and tam

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(6) CASING/LINER**

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	<input checked="" type="checkbox"/>	3	106	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

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

**(7) PERFORATIONS/SCREENS**

Perforations Method \_\_\_\_\_

Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/S Casing/ Screen  
 creen Liner Dia From To Scrn/slot Slot # of Tele/  
 width length slots pipe size

Perf/S	Casing/	Screen	Dia	From	To	Scrn/slot	Slot	# of	Tele/
creen	Liner	Dia	From	To	width	length	slots	pipe size	

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
50		180	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 23.00 S N/S Range 30.00 E E/W WM  
 Sec 23 NW 1/4 of the NW 1/4 Tax Lot 400  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD

Street address of well  Nearest address

28910 Hwy 20, Hines, OR 97738

**(10) STATIC WATER LEVEL**

Existing Well / Predeepening	Date	SWL(psi)	+	SWL(ft)
Completed Well	04-23-2010			14

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES

Depth water was first found 22

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
04-24-2010	22	180	50			14

**(11) WELL LOG**

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

Material	From	To
topsoil	0	1
Clay Brown	1	22
Sand Med Clay	22	35
Gravel Med	35	50
Sand Med Cinders	50	65
Gravel Med	65	80
Sand Cinders	80	100
Sandstone	100	120
Pumice Multicolored	120	170
Rock Red	170	180

**RECEIVED**

DEC 06 2011

WATER RESOURCES DEPT  
 SALEM, OREGON

Date Started 04-23-2010 Completed 04-24-2010

**(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 1424 Date 04-30-2010

Electronically Filed

Signed TIMOTHY K RILEY (E-filed)

Contact Info (optional)