



08-23-2010

WELL LABEL # L 102524

START CARD # 1010935

(1) LAND OWNER Owner Well I.D. _____

First Name _____ Last Name _____
 Company CHILEDERS HAY RANCH
 Address 30040 WEAVER SPRINGS LANE
 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 450.00 ft.

BORE HOLE			SEAL			Amt	lbs
Dia	From	To	Material	From	To		
18	0	18	Bentonite Chips	0	18	50	S
14	18	450					

How was seal placed: Method A B C D E
 Other poured dry & tamp
 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"/>	14	<input checked="" type="checkbox"/>	2	160	.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	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)
1,000		150	1

Temperature 62 °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 26.00 S N/S Range 31.00 E E/W WM
 Sec 7 SW 1/4 of the SE 1/4 Tax Lot 1002
 Tax Map Number _____ Lot _____
 Lat _____ ° _____ ' _____ " or _____ DMS or DD
 Long _____ ° _____ ' _____ " or _____ DMS or DD
 Street address of well Nearest address

30040 WEAVER SPRINGS LANE

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	08-16-2010		38

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 38

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
08-16-2010	38	420	1,000		38

(11) WELL LOG Ground Elevation _____

Material	From	To
Topsoil clay & loam	0	2
Clay brown	2	24
Clay grey	24	40
Cinders sand black	40	90
Clay green	90	105
Sand fine black	105	120
Clay grey	120	140
Sand medium black	140	151
Clay green	151	210
Sand medium	210	218
Claystone green	218	310
Cinders black	310	370
Clay green	370	420
Clay black	420	450

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WATER RESOURCES DEPT
SALEM, OREGON

Date Started 08-10-2010 Completed 08-16-2010

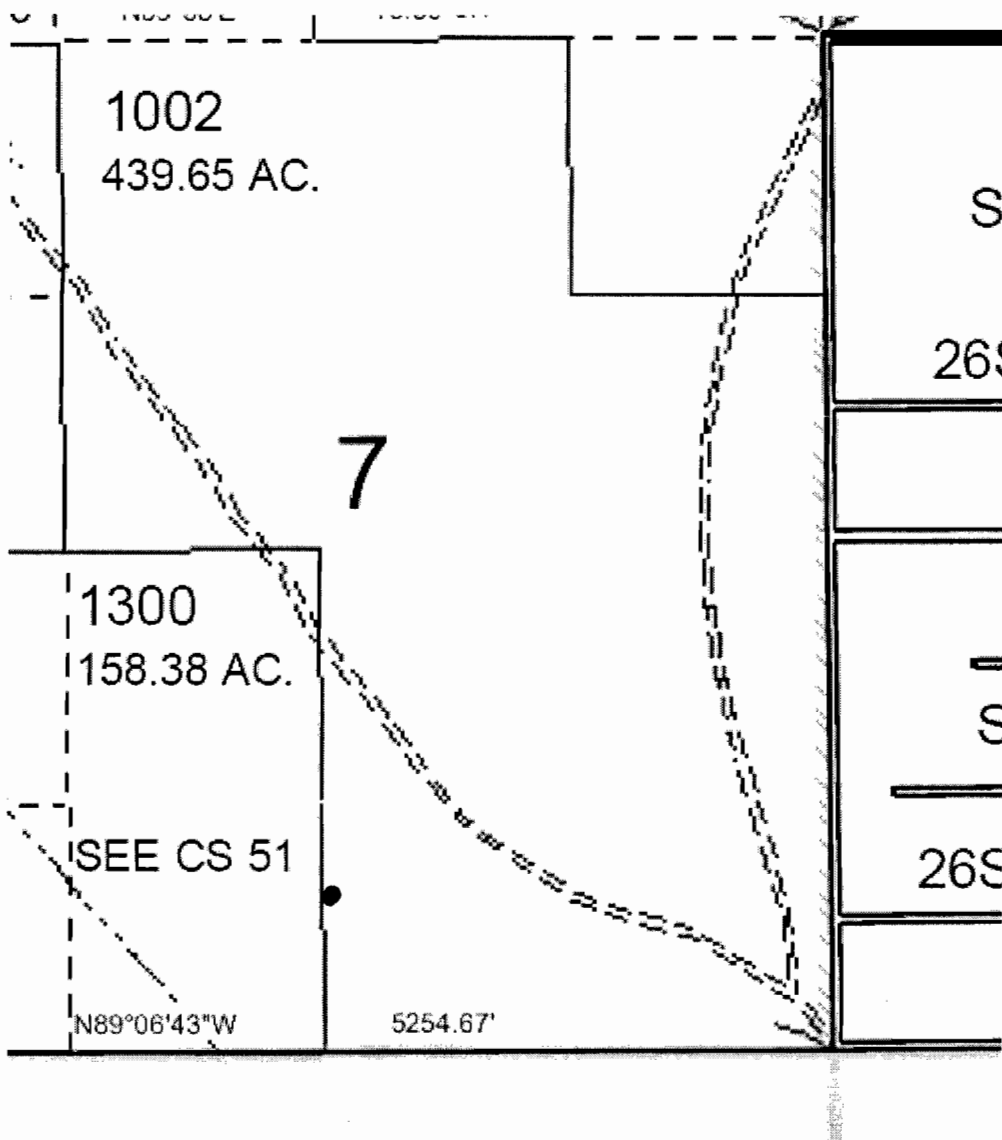
(unbonded) Water Well Constructor Certification
 I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my 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 08-23-2010
 Electronically Filed
 Signed TIMOTHY K RILEY (E-filed)
 Contact Info (optional) _____

EXEMPT USE WELL LOCATION MAP



Harney County

Assessor Map Reference Number: **26S 31E 7 SWSE; Tax Lot 1002**

Street Address of Well, if Available: **30040 Weaver Springs Lane, Burns, OR.**

Well Log # **HARN 51720**. Well Label (ID Tag) # **L 102524**. (Please Locate Well and Indicate distance From Property or Survey Corner, See Attached Sample Well Location Map.). You may also locate your well using our exempt use well mapping tool on our website at www.wrd.state.or.us/OWRD/exempt_use_788_info.shtml or by contacting the Exempt Use Well Program Coordinator at 503 986-0861.

MAP NOT TO SCALE

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