

DRAFT

WELL I.D. # L 102475
 START CARD # 184973

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

(1) LAND OWNER Well Number _____
 Name Helen Dea Hoed
 Address 1831 Country Lane Rd.
 City Grand View State WA Zip 98430

(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 328 ft.
 Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
20"	0	18	Bentonic D	0	18	48 BAGS
16"	18	328				52

How was seal placed: Method A B C D E
 Other powdered dry
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Casing/Liner	Diameter	From	To	Gauge	SEAL			
					Steel	Plastic	Welded	Threaded
Casing:	16"	+2	187	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	14"	20	280	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS

Perforations Method factory
 Screens Type slot Material 316

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
200	280	3/16	2400			<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
2.5 min	0		

Temperature of water 54° Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL (legal description)
 County Hanney
 Tax Lot 900 Lot _____
 Township 26 N or S Range 31 E or W WM
 Section 5 1/4 _____ 1/4 _____
 Lat _____ " or _____ (degrees or decimal)
 Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 30042 Weaver Springs Ln. Burns OR 97720

(10) STATIC WATER LEVEL
35 ft. below land surface. Date 4/18/13
 _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
 Depth at which water was first found 35 ft

From	To	Estimated Flow Rate	SWL
35 ft	328 ft	200 GAL Per min	

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
TOP SOIL	0	5	
Brown clay	5	20	
Grey clay w/ sand	20	232	
Black sand	232	240	
Grey clay w/ sand	240	280	
Broken clay w/ gravel	280	328	

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APR 22 2013

SALEM, OR

Date Started 2/15/13 Completed 4/18/13

(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 1557 Date 4/18/13
 Signed Brad Williams