

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

HARN 51959

7/28/2013

WELL I.D. LABEL# L

START CARD #

ORIGINAL LOG #

108933

1019705

(1) LAND OWNER

Owner Well I.D. _____

First Name JEB

Last Name WHITBY

Company WHITBY BROTHERS FARM

Address 720 W. JUNIPER RD.

City MESA State WA Zip 99343

(2) TYPE OF WORK☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing:

Dia	From	To	Gauge	Stl	Plstc	Wld	Thrd
				☐	☐	☐	☐
Material From To Amt sacks/lbs							

Seal:

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(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 CONSTRUCTIONSpecial Standard ☐ (Attach copy)

Depth of Completed Well 690.00 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
22	0	700	Bentonite	0	7	27	S
			Cement	7	122	162	S

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☐ Other _____

Backfill placed from 690 ft. to 700 ft. Material SAND & GRAVEL

Filter pack from 122 ft. to 700 ft. Material GRAVEL Size pea gravel

Explosives used: ☐ Yes Type _____ Amount _____**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount

Actual Amount

(6) CASING/LINER

Casing Liner

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
16	☒	2.5	360	.375	☒	☐	☒	☐
	☐				☐	☐	☐	☐
	☐				☐	☐	☐	☐
	☐				☐	☐	☐	☐
	☐				☐	☐	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____

Temp casing ☐ Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type johnson vwire Material stainless

Perf/	Casing/	Screen	Dia	From	To	Scrn/slot	Slot	# of	Tele/
Screen	Liner					width	length	slots	pipe size
Screen	Casing	16	360	570	.125				
Screen	Casing	10	570	690	.125				

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
2000		690	20
2400	130	400	5

Temperature 70 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 33.00 S N/S Range 31.00 E E/W WM

Sec 9 SW 1/4 of the NW 1/4 Tax Lot 1100

Tax Map Number _____ Lot _____

Lat _____ " or 42.72778200 DMS or DD

Long _____ " or -119.08520900 DMS or DD

☐ Street address of well ☒ Nearest address

36605 ROCK CREEK LANE FRENCHGLEN OR 97736

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	6/26/2013			105
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 145.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
6/26/2013	300	690	2000			105

(11) WELL LOG

Ground Elevation _____

Material	From	To
Topsoil	0	2
sand and gravel pieces	2	12
clay	12	37
gravel	37	50
burnt or brittle clay (brown)	50	70
burnt or brittle clay (brown/red) W/sand	70	97
sticky tan clay	97	145
sand	145	150
clay	150	180
burnt/brittle clay with some fine sand	180	195
white clay	195	237
burnt or brittle clay	237	300
fine brown sand	300	357
fine and med sand brown	357	500
fine and med sand green/black	500	570
fine and med sand with thin clay streaks	570	613
fine and med sand brown	613	687
soft rock (green & redish brown)	687	700

Date Started 5/6/2013 Complete 6/26/2013

(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 1818 Date 7/28/2013

Signed DANIEL MCLERAN (E-filed)

Contact Info (optional) Daniel McLeran 208-941-0647

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

Pump test was completed on July 22, Well was gradually increased over 9hrs starting at 800 GPM up to 2,400 GPM where the pump maxed out. The pumping level stabilized at 240' and 2,400GPM
Development:
60+ hrs high pressure (300PSI) air development completed, before setting the cement seal. Gravel pack was settled until a total of 62 yards where added.