

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

HARN 52482
RECEIVED BY OWRD

WELL LABEL # L 114928

MAR 28 2016

START CARD # 211322

Harn 52482

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

(1) LAND OWNER

Owner Well I.D. _____
First Name Dean Last Name Nikkel
Company _____
Address 36997 Sandhill 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 ☐ Injection
☐ Thermal ☐ Other _____

(5) BORE HOLE CONSTRUCTION

Special Standard: ☐ Yes (attach copy)
Depth of Completed Well 360 ft.

BORE HOLE			SEAL			Amount	Scks/lbs
Dia	From	To	Material	From	To		
18"	0'	20'	Bentonite	0'	20'	1250 lb.	25/50 lb.
14"	20'	180'					
8"	180'	360'					

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

☒ Other Poured dry from surface
Backfill placed from 0' ft. to 20' ft. Material Bentonite

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Yes Type _____ Amount _____

(6) CASING/LINER

Csg	Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		14"		11.5'	140'	.25	X			

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

Temporary casing ☐ Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method None

Screens Type _____ Material _____

Perf	Scrn	Csg	Linr	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	Drawdown	Drill stem/Pump depth	Duration (hr)
1400	110'	140'	5 Hr.

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 or S Range 33.50 E or W W.M.
Sec 7 SE 1/4 of the SE 1/4 Tax Lot 2000
Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or _____ DMS or DD
Long _____ ° _____ ' _____ " or _____ DMS or DD

Street Address of Well (or nearest address) 36997 Sandhill Lane

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Predeepening				
Completed Well	3-18-16			38'

Flowing Artesian? ☐ Yes Dry Hole? ☐ Yes

WATER BEARING ZONES Depth water was first found 38'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
8-15-15	38'	49'	500			38'
10-12-15	50'	163'	45			38'
10-18-15	164'	182'	1350			38'
1-22-16	183'	360'	50			38'

(11) WELL LOG

Ground Elevation _____

Material	From	To
Top Soil	0'	2'
Sandy Brown Clay	3'	29'
Sandy Gray Clay	30'	37'
Black Gravel	38'	49'
Sandy Blue Clay	50'	163'
Med. Gravel	164'	182'
Ash Stone Sandy	183'	198'
Sandy Green Clay	199'	232'
Sandy Brown Clay	233'	350'
Brown Clay fine Black Sand	351'	360'

Date Started 7-29-15 Completed 3-18-16

(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.

APR 22 2016

License Number _____ Date _____

Signed SALEM, OR

(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 Land Owner Date 3-18-16

Signed Dean Nikkel

Contact Info. (optional), Bond # 71563208