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

HARN 52611
11/9/2016

WELL I.D. LABEL# L 123045
START CARD # 1032522
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name LORIN Last Name SHERBURN
Company
Address 48639 HEY 205
City BURNS State OR Zip 97720

(2) TYPE OF WORK

[X] New Well [ ] Deepening [ ] Conversion
[ ] Alteration (complete 2a & 10) [ ] Abandonment(complete 5a)

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:									

	Material	From	To	Amt	sacks/lbs
Seal:					

(3) DRILL METHOD

[X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE

[ ] Domestic [X] Irrigation [ ] Community
[ ] Industrial/ Commericial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)
Depth of Completed Well 420.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs
16	0	38	Bentonite Chips	0	3	3	S
12	38	420			Calculated	2.36	
			Cement	3	38	25	S
					Calculated	16.23	

How was seal placed: Method [ ] A [ ] B [X] C [ ] D [ ] E
[X] Other BENT FROM SURFACE
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
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
(•)	( )	12	[X]	2	136	.250	(•)	( )	[X]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]

Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 136
Temp casing [X] Yes Dia 16 From 0 To 26

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type Material

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/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)
600		420	1

Temperature 62 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 141 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 22.00 S N/S Range 32.00 E E/W WM
Sec 36 SE 1/4 of the NE 1/4 Tax Lot 2500
Tax Map Number Lot
Lat ° ' " or 43.62230000 DMS or DD
Long ° ' " or -118.82240000 DMS or DD
( ) Street address of well (•) Nearest address

36629 HWY 20 E BURNS
CLOSER TO RATTLESNAKE RD. APPROX. 1/2 TO 3/4 MI

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration			[ ]	
Completed Well	10/13/2016		[ ]	30

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 7.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
10/7/2016	7	20	10		[ ]	7
10/13/2016	94	420	800		[ ]	30
					[ ]	
					[ ]	
					[ ]	

(11) WELL LOG

Ground Elevation

Material	From	To
top soil brown	0	1
clay dark brown	1	3
sandy clay brown	3	6
sand medium fine brown	6	20
clay grey soft	20	25
clay brown soft	25	76
clay light brown hard	76	94
clay lt brown hard with pumice strips	94	184
clay tan hard with pumice strips	184	264
clay green hard with pumice strips	264	420

Date Started 10/6/2016 Completed 10/13/2016

(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 1899 Date 11/9/2016

Signed SAM P KINGREY (E-filed)

Contact Info (optional)