

WELL I.D. LABEL#	125279
START CARD #	212522
ORIGINAL LOG #	

First Name _____ Last Name _____
 Company DEPARTMENT OF STATE LAND
 Address 1645 NE Forbes Rd Suite 112
 City Bend State OR Zip 97706

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:									
	Material		From	To	Amt	sacks/lbs			
Seal:									

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other _____

PROPOSED USE

☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering

☐ Thermal ☐ Injection ☐ Other _____

☐ Domestic ☒ Irrigation ☐ Community

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
20"	0	79	Ben T	0	79	80 sack
16"	79	280			Calculated	55 sack
10"	280	400			80	sack
					Calculated	55

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Bent 3 mm pore

Backfill placed from _____ ft. to _____ ft. Material _____

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

Explosives used: ☐ Yes Type _____ Amount _____

Proposed Amount	Pounds	Actual Amount	Pounds
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Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
☒	☐	16"	+	1	79	.250	☒	☐	☒	☐
☐	☒	-	-	5	280	.250	☒	☒	☐	☐
☐	☐						☐	☐	☐	☐
☐	☐						☐	☐	☐	☐
☐	☐						☐	☐	☐	☐
☐	☐						☐	☐	☐	☐

Shoe		Inside		Outside		Other	Location of shoe(s)
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Temp casing ☐ Yes Dia _____ From _____ To _____

Perforations Method Mitchell

Screens Type _____ Material _____

[illegible]

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
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300	400 gal	hr

Temperature 53' °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS amount 280

From	To	Description	Amount	Units
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County Harney Twp. 23 N/S Range 32 E/W WM
Sec 14 SE 1/4 of the 1/4 Tax Lot 190
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
☐ Street address of well ☒ Nearest address

milepost 142 $\frac{1}{2}$ out Bkm then High 90
1 hr 14 min

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration			☐	
Completed Well			☒	15
Flowing Artesian?	☐	Dry Hole?	☐	

WATER BEARING ZONES			Depth water was first found <u>60</u>		
SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

Ground Elevation

Material	From	To
Top Soil	0	2
Clay Clay	2	87
Black Sand	87	280
Clay Clay	280	400
RECEIVED BY OWRD		
RECEIVED BY OWRIAN 03 2017		
MAR 06 2017	SALEM, OR	
SALEM, OR		

Date Started 5-31-16 Completed 6-24-16

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
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Signed _____

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 16541 Date 12-27-16

Signed _____

Contact Info (optional):