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

HARN 52646

6/6/2017

WELL I.D. LABEL# L 124487
START CARD # 1033866
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name JOHN Last Name WARREN
Company
Address P.O. BOX 491942
City REDDING State CA Zip 96049

(2) TYPE OF WORK

☒ 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

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

(4) PROPOSED USE

☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/ Commericial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)
Depth of Completed Well 500.00 ft.

BORE HOLE

Dia	From	To
26	0	38
12	38	348
6	348	500

SEAL

Material	From	To	Amt	sacks/lbs
Bentonite Chips	0	38	77	S
		Calculated	75	
		Calculated		

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other POURED DRY
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
●	○	20	☒	2	38	.250	●	○	☒	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐

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

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type Material

Perf/ Screen	Casing/ Screen Liner	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)
500		340	4

Temperature 68 °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS amount 348 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 25.00 S N/S Range 31.00 E E/W WM
Sec 19 NW 1/4 of the NE 1/4 Tax Lot 3700
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
◉ Street address of well ○ Nearest address
30911 WEAVER SPRINGS RD BURNS OR 97720

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration			☐	
Completed Well	6/6/2017		☐	188

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 235.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
6/6/2017	235	375	500		☐	188
					☐	
					☐	
					☐	
					☐	

(11) WELL LOG

Ground Elevation

Material	From	To
soil	0	2
brown clay with gravel	2	18
volcanic conglomerate	18	55
black basalt	55	262
fractured black lava	262	375
fractured basalt with ash seams	375	500

Date Started 4/7/2017 Completed 6/6/2017

(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 1739 Date 6/6/2017

Signed CHARLES M FRY (E-filed)

(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 1355 Date 6/6/2017

Signed ARTHUR L FRY (E-filed)

Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

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