

(1) LAND OWNER  
 Owner Well I.D.  
 First Name Tim Last Name PUCKETT  
 Company \_\_\_\_\_  
 Address PO Box 235  
 City CLV State OR Zip 97641

(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:          
 Seal:          
 Material From To Amt sacks/lbs

(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 CONSTRUCTION Special Standard  (Attach copy)  
 Depth of Completed Well 260 ft.  
 BORE HOLE SEAL sacks/lbs  

Dia	From	To	Material	From	To	Amt	lbs
23"	0	76	Benton	0	76	212	seal
76"	076	180				Calculated	100
10"	180	260				Calculated	

How was seal placed: Method  A  B  C  D  E  
 Other 3/8 Bent 3mm PVC  
 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 Pounds Actual Amount Pounds

(6) CASING/LINER  

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16"	#	2'	76	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	12"	#	20	200	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

  
 Shoe  Inside  Outside  Other Location of shoe(s) 200'  
 Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_  

Perf/S	Casing/	Screen	Scrn/slot	Slot	# of	Tele/
green	Liner	Dia	width	length	slots	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)
2000'		2' diameter	5 hr

  
 Temperature 53° °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) TDS amount 492  

From	To	Description	Amount	Units

HARN 52819  
 (9) LOCATION OF WELL (legal description)  
 County Harn Twp 27 N/S Range 34 E/W WM  
 Sec 6 SW 1/4 of the NE 1/4 Tax Lot 700  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address

6064 Anderson rd Princeton

(10) STATIC WATER LEVEL  

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	8-2-19			30'

  
 Flowing Artesian?  Dry Hole?   
 WATER BEARING ZONES Depth water was first found 45  

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
8-1-19	45	60'	500gpm		30'
8-1-19	105	110	500gpm		30'
8-5-19	200	260	2000gpm		30'

(11) WELL LOG  
 Ground Elevation \_\_\_\_\_  

Material	From	To
TOP soil	0	2
Blue clay	2	23
Black sand w/B	23	45
Green clay	42	56
Blue clay	56	100
Black sand w/B	100	105
Green clay	105	145
Blue clay	145	180
Gray tan rock	180	200
Flattish blue rock	200	220
Black clay	220	245
Broken tan rock	245	260
Lined in	230'	

  
 RECEIVED  
 SEP 18 2019

Date Started 8-2-19 OWRD Completed 8-5-19

(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 1654 Date 8-29-19  
 Signed [Signature]  
 Contact Info (optional) \_\_\_\_\_