

STATE OF OREGON
WATER SUPPLY WELL REPORT

HARN 53031

WELL I.D. LABEL# L

144265

START CARD #

1058612

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

9/26/2022

(1) LAND OWNER

Owner Well I.D. _____

First Name BILLLast Name PEILA

Company _____

Address PO BOX 723City HINESState ORZip 97738**(2) TYPE OF WORK**☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
 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/ Commercial ☒ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____
(5) BORE HOLE CONSTRUCTIONSpecial Standard ☐ (Attach copy)Depth of Completed Well 82.00 ft.

BORE HOLE			SEAL			sacks/lbs	
Dia	From	To	Material	From	To	Amt	
10	0	20	Bentonite	0	20	16	S
6	20	82			Calculated	9.13	
					Calculated		

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other POURED AND TAMPED

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
☒	☐	6	☒	1.5	40	.250	☒	☐	☒	☐
☐	☒	4.5	☐	20	80	.020	☐	☒	☐	☒
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____Temp casing ☐ Yes Dia _____ From + _____ To _____**(7) PERFORATIONS/SCREENS**Perforations Method factory cut

Screens Type _____ Material _____

Perf/	Casing/	Screen	Dia	From	To	Scrn/slot	Slot	# of	Tele/
Screen	Liner					width	length	slots	pipe size
Perf	Liner	4.5	60	80	.002	2	2000		

(8) WELL TESTS: Minimum testing time is 1 hour☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
20		60	1

Temperature 57 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 250 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County HARNEY Twp 24.00 S N/S Range 31.00 E E/W WMSec 7 SE 1/4 of the SW 1/4 Tax Lot 900

Tax Map Number _____ Lot _____

Lat _____ " or 43.49843705 DMS or DD

Long _____ " or -119.04970145 DMS or DD

☐ Street address of well ☒ Nearest address30898 GREENHOUSE LN**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	9/22/2022			13.7
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 13.70

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
9/22/2022	13.7	80	20			13.7

(11) WELL LOG

Ground Elevation _____

Material	From	To
topsoil clay loam	0	1
clay tan	1	10
sand clay	10	14
clay grey	14	45
gravel medium	45	80
clay grey	80	82

Date Started 9/21/2022Completed 9/22/2022**(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 1424Date 9/26/2022Signed TIMOTHY RILEY (E-filed)Contact Info (optional) Timothy Riley

ORIGINAL - WATER RESOURCES DEPARTMENT

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

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

HARN 53031

9/26/2022

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department
725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 43.49843705 Datum: WGS84

Longitude: -119.04970145

Township/Range/Section/Quarter-Quarter Section:
WM24.00S31.00E7SESW

Address of Well:
30898 GREENHOUSE LN

Well Label: 144265

Printed: September 26, 2022

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

