STATE OF OREGON

WATER WELL REPORT

(as required by ORS 537.765)

Lake 30-31-02

MAY 19 1989

WATER RESOURCES DEPT.
SALEM, OREGON

SC 33 J

28/18E/R

(1) OWNER:

Well Number:

Name FLOWERREE FARMS INC

Address

City Christmas Valley State Or Zip

(2) TYPE OF WORK:

☐ New Well ☑ Deepen ☐ Recondition ☐ Abandon

(3) DRILL METHOD

☑ Rotary Air ☐ Rotary Mud ☐ Cable

☐ Other

(4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☑ Irrigation

☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes ☐ No ☐ Depth of Completed Well ____ ft.

Explosives used Yes ☐ No ☐ Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
8"	240	300	Mo Casing add			

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☐ Other

Backfill placed from ____ ft. to ____ ft. Material ____

Gravel placed from ____ ft. to ____ ft. Size of gravel ____

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method ____

☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour

☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
1500		300	1 hr

Temperature of water ____ Depth Artesian Flow Found ____

Was a water analysis done? ☐ Yes By whom ____

Did any strata contain water not suitable for intended use? ☐ Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other ____

Depth of strata: ____

(9) LOCATION OF WELL by legal description:

County LAKE Latitude ____ Longitude ____

Township 27S N or S, Range 18E E or W, WM.

Section 19 ¼ ¼

Tax Lot 100 Lot ____ Block ____ Subdivision ____

Street Address of Well (or nearest address) 1 mile NORTH Point Road

(10) STATIC WATER LEVEL:

20 ft. below land surface. Date 5-2-89

Artesian pressure ____ lb. per square inch. Date ____

(11) WATER BEARING ZONES:

Depth at which water was first found ____

From	To	Estimated Flow Rate	SWL
285	300		20

(12) WELL LOG:

Ground elevation ____

Material	From	To	SWL
BLACK BASALT	240	250	20
BLACK BASALT & SAND	250	285	
BLACK SAND & CO.	285	300	
8" hole 240 to 300'			

Date started 5-2-89 Completed 5-2-89

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed Mel Search WWC Number ____

Date ____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed Mel Search WWC Number 567

Date 5-6-89

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