

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

JUL 24 1990
LAKE 4022

41S/21E/196a

(START CARD) # W-14773

(1) OWNER:

Well Number: 14773
Name Lake County Cemetary District
Address 928 Millview
City Lakeview State OR Zip 97630

(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 146 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
16	0	20	Cement	0	20	24
8	20	146				

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	Material			
				Steel	Plastic	Welded	Threaded
6	0	130	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method Torch
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
80	130	1/8x6	350			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing
 Artesian

Yield gal/min	Drawdown	Drill stem at	Time
25+	0	100'	1 hr.

Temperature of water 49° Depth Artesian Flow Found _____

Was a water analysis done? Yes By whom No
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other No
Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Lake Latitude _____ Longitude _____
Township 41S N or S, Range 21E E or W, WM.
Section 19 NE 1/4 NW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) New Pine Creek
Cemetary

(10) STATIC WATER LEVEL:

70 ft. below land surface. Date 7/3/90
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 85'

From	To	Estimated Flow Rate	SWL
85	110	25+	70

(12) WELL LOG:

Ground elevation 4760

Material	From	To	SWL
Loam & broken shale	0	14	
Brown clay	14	50	
Sandstone	50	85	
Black coarse sand	85	110	70
Black coarse sand w/intermittent thin layer of sandstone	110	146	

Date started 6/19/90 Completed 7/3/90

(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.

WWC Number _____
Signed _____ 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.

WWC Number 766
Signed [Signature] Date 7/3/90