

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

RECEIVED

NOV 23 1994

(START CARD) # 59628

Instructions for completing this report are on the last page of this form.

WATER RESOURCES DEPT.

(1) OWNER:

Well Number

Name KEN + KATHLEEN KRAUSE
Address GENERAL DELIVERY
City FORT ROCK State OREGON Zip 97735

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:

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

(4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 382 ft.

Explosives used ☐ Yes ☒ No Type Amount

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
18"	0	20	PORTLAND CEMENT	0	20	23 SACKS
14"	+1	101				
8"	101	382				

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: 14"	+1	101	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: NONE				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations

Method

☐ Screens

Type

Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
NONE						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input 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

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

Depth of strata:

(9) LOCATION OF WELL by legal description:

County LAKE Latitude Longitude

Township 25 or S Range 14 E or WM.

Section 33 NE 1/4 SE 1/4

Tax Lot NONE Lot Block Subdivision

Street Address of Well (or nearest address) General Delivery

FORT ROCK, OREGON 97735

(10) STATIC WATER LEVEL:

37 ft. below land surface. Date 10-25-94

Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 110

From	To	Estimated Flow Rate	SWL
110	111		37
125	126		
160	161		
175	176		
324	382	2000 gpm/min	37

(12) WELL LOG:

Ground Elevation Approx 4240

Material	From	To	SWL
Top Soil Sandy Brn	0	25	
CLAY Brn	25	125	
SAND BLK Fine	110	111	37'
CLAY GRAY	111	125	
pumice course	125	126	37'
CLAY GRAY	126	160	
pumice course	160	161	37'
CLAY GRAY	161	175	
pumice course	175	176	37'
CLAY GRAY	176	205	
Cubed CLAY GRAY	205	275	37'
CLAY GRAY	275	324	
Rock Broken + cinders	324	382	37'

RECEIVED

JAN 12 1995

WATER RESOURCES DEPT.

Date started 9-14-94 SALEM, OREGON completed 10-25-94

(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 water supply well construction standards. Materials used and information reported above are true to the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 657

Signed

Date 10-21-94