

12. Lake 4573

RECEIVED 255/18E/06BD
FEB - 7 1996
(START CARD) # 71508

WALTON, J. H. 1963. *Journal of the Royal Society of New Zealand* 33: 1-10.

FEB - 7 1996

(START CARD)

71508

Well Number.

Name GALYN ROIT
Address Christmas Valley
City OR State OR Zip 97641

☐ New Well ☒ Deepen ☐ Recondition ☐ Abandon

☒ Rotary Air ☐ Rotary Mud ☐ Cable
☐ Other _____

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

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 470 ft.
Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
8"	370	470				
no casing added						

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 _____

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					<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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<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)

☐ Perforations Method _____

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<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"/>

☐ Pump ☐ Bailer ☐ Air / ☒ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
1000		470	1 hr

Temperature of Water 54 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: _____

County LAKE Latitude _____ Longitude _____
Township 13S N or S. Range 18E E or W. WM. _____
Section 06 $\frac{1}{4}$ $\frac{1}{4}$
Tax Lot 1501 Lot NW Block SF Subdivision _____
Street Address of Well (or nearest address) Shoreline Milligan RD

210 ft. below land surface. Date 5-10-93
Artesian pressure _____ lb. per square inch. Date _____

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWI
<i>DEEPSEED</i>			

Ground elevation _____

[illegible]

Date started 4-28 95 Completed 5-10 95

(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 _____ 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 56
Date 5-15-95