

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

lake
50505

JUN - 2 1998

WATER RESOURCES DEPT. (START CARD) # 93472
SALEM, OREGON

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

(1) OWNER: Well Number 116068
Name H + F Farms
Address PO BOX 266
City CHRISTMAS VALLEY State OR Zip 97641

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
18 1/2"	0	158	Cement	0	150	130
18 1/2"	158	520				
8"	520	915				

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:

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing: <u>14 1/2"</u>		<u>41</u>	<u>158</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: <u>12"</u>		<u>0</u>	<u>337</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>240</u>	<u>260</u>	<u>3 x 3/16</u>	<u>250</u>	<u>12"</u>		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>1500</u>		<u>915</u>	<u>10</u>

Temperature of water 56 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 Lane Latitude _____ Longitude _____
Township 27 N or S Range 16 E or W. WM.
Section 27 SE 1/4 NE 1/4
Tax Lot 400-300 of _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 90455 OUT CHRIST VALLEY TO OIL OILY RD TRAIL LEFT 4 mi 1/2 TRAIL

(10) STATIC WATER LEVEL:
26 ft. below land surface. Date 5-15-98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
<u>443</u>	<u>443 1/2</u>	<u>300 gal</u>	<u>26</u>

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AUG 04 1998

(12) WELL LOG:
Ground Elevation _____ WATER RESOURCES DEPT. SALEM, OREGON

Material	From	To	SWL
<u>Brown Sand</u>	<u>0</u>	<u>2</u>	
<u>Brown Clay Stone</u>	<u>2</u>	<u>18</u>	
<u>Gray Clay Stone</u>	<u>18</u>	<u>120</u>	
<u>Green Stone</u>	<u>120</u>	<u>440</u>	
<u>Clay and Pumice</u>	<u>440</u>	<u>443</u>	<u>WB</u>
<u>Green Stone</u>	<u>443</u>	<u>570</u>	
<u>Green Stone Pumice</u>	<u>570</u>	<u>693</u>	
<u>Sand</u>	<u>693</u>	<u>696</u>	
<u>Rock</u>	<u>693</u>	<u>696</u>	
<u>gray stone</u>	<u>696</u>	<u>781</u>	
<u>Rock Larn</u>	<u>781</u>	<u>784</u>	
<u>gray stone</u>	<u>784</u>	<u>837</u>	
<u>Rock</u>	<u>837</u>	<u>876</u>	
<u>Brown Rock</u>	<u>876</u>	<u>881</u>	<u>WB</u>
<u>Black clark and sand</u>	<u>881</u>	<u>915</u>	<u>WB</u>

Date started 4-3-98 Completed 5-15-98

(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 1654
Signed [Signature] Date 5-29-98