

LAKE 50935

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AMENDED

DEC 01 1999
WATER RESOURCES DEPT.
SALEM, OREGON
SUPPLY WELL REPORT
(as required by ORE 537.765)

LAKE
50935

WATER RESOURCES DEPT.
SALEM, OREGON

WELL I.D.# L 37256
START CARD# W 46485

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

(1) OWNER: Well Number _____
Name Julius Bunkowski
Address HC64 County Rd 218 P.O. Box 882
Clay Lakeview State OR Zip 97630

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other Reverse Rotary

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 500 ft.
Explosives used Yes No Type _____ Amount _____

HOLE SEAL

Diameter	From	To	Material	From	To	Stacks or segments
24	0	500	Cement Gr	0	75	6.5 Yards

How was seal placed: Method A B C D E
 Other _____
Backfill placed from 80 ft. to 75 ft. Material Bentonite
Gravel placed from 80 ft. to 500 ft. Size of gravel 3/8

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 14	+2	95	5/16	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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:

From	To	Slot size	Number	Diameter	Tubing size	Casing	Liner
95	115	1/8	DBL	14		<input checked="" type="checkbox"/>	<input type="checkbox"/>
115	135	1/8	EF	14		<input type="checkbox"/>	<input type="checkbox"/>
135	155	1/8	SF	14		<input type="checkbox"/>	<input type="checkbox"/>
165	215	1/8	DBLML	14		<input type="checkbox"/>	<input type="checkbox"/>
215	235	1/8	EF	14		<input type="checkbox"/>	<input type="checkbox"/>
235	255	1/8	SF	14		<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
255 495 1/8 DBL 14

Flowing	Time
<input checked="" type="checkbox"/> Pump <input type="checkbox"/> Bailor <input type="checkbox"/> Air <input type="checkbox"/> Artesian	1 hr.
Yield gal/min	1800
Drydowns	124.27'
Drill stem at	
Pumping level	136.27'
46 Hrs.	

Temperature of water n/a Depth Artesian Flow Found _____
Was a water analysis done? No 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 39 N or S Range 20 E or W. WM.
Section 5 SE 1/4 NW 1/4
Tax Lot 413110 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) HC64 County Rd. 218
Lakeview, OR 97630

(10) STATIC WATER LEVEL:
12 ft. below land surface. Date 10/3/99
Artesian pressure NA lb. per square inch. Date 10/3/99

(11) WATER BEARING ZONES:
Depth at which water was first found 8' Surface water sealed off

From	To	Estimated Flow Rate	SWL
110	495	1800 GPM	12

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Clay	0	10	
Sand/grav. some clay	10	70	
Sandy clay	70	105	
Silty clay w/grav. layers	105	110	
Sand & gravel	110	112	
Silty clay	112	120	
Sand & gravel	120	135	
Sandy clay	135	145	
sand/gravel, some hard			
sand layers	145	170	
Sand & gravel	170	185	
Gray clay	185	187	
Sand, gravel w/some clay			
layers	187	312	
Silty Sand	312	380	
Clay w/sand layers	380	430	
Silty clay w/small			
gravel layers	430	500	

Date started 9/27/99 Completed 10/3/99
(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.
WVC 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.
WVC Number 1598
Signed R. Wilson Date 10/30/99

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WELL I.D.# L 37256 START CARD# W 46485

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

(1) OWNER: Well Number _____ Name Julius Bunkowski Address HC64 County Rd. 218 P.O. Box 882 City Lakeview State OR Zip 97630

(2) TYPE OF WORK [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD: [] Rotary Air [] Rotary Mud [] Cable [] Auger [X] Other Reverse Rotary

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [] No Depth of Completed Well 500 ft. Explosives used [] Yes [X] No Type _____ Amount _____

Table with columns: HOLE, SEAL, Diameter, From, To, Material, From, To, Sacks or pounds. Row 1: 24, 0, 500, Cement Gr 0, 75, 7 Sacks. Row 2: 24", 75, 80, Bentonite, 75, 80, 3/4 Hole Plug.

How was seal placed: Method [] A [] B [X] C [] D [] E [] Other Bentonite seal from 80-75 Backfill placed from na ft. to na ft. Material _____ Gravel placed from 80 ft. to 500 ft. Size of gravel 3/8

Table for casing/liner with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 14, +2, 95, 5/16, [X], [], [X], []. Liner: [], [], [], [], [], [], [], [].

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS: [X] Perforations Method Mill Slot 5/16 wall [] Screens Type _____ Material steel. Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner.

(8) WELL TESTS: Minimum testing time is 1 hour 235 255 1/8 SF 14 255 495 1/8 DBL 14

Table for well tests with columns: Yield gal/min, Drawdown, Drilling stem at, Time. Row 1: 1800, 124.27', _____, 46 Hrs. Pumping level 136.27'

Temperature of water n/a Depth Artesian Flow Found _____ Was a water analysis done no [] 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 39 N or S Range 20 E or W. WM. Section 5 SE 1/4 NW 1/4 Tax Lot 613110 Lot _____ Block _____ Subdivision _____ Street Address of Well (or nearest address) HC64 County Rd. 218 Lakeview, OR 97630

(10) STATIC WATER LEVEL: _____ ft. below land surface. Date 10/3/99 Artesian pressure NA lb. per square inch. Date 10/3/99

(11) WATER BEARING ZONES: Depth at which water was first found 8' Surface water sealed off. Table with columns: From, To, Estimated Flow Rate, SWL.

(12) WELL LOG: Ground Elevation _____

Table for well log with columns: Material, From, To, SWL. Rows include Clay, Sand/grav. some clay, Silty clay w/grav. layers, Sand & gravel, Silty clay, Sand & gravel, Sandy clay, sand/gravel, some hard sand layers, Sand & gravel, Gray clay, Sand, gravel w/some clay layers, Silty Sand, Clay w/sand layers, Silty clay w/small gravel layers.

Date started 9/27/99 Completed 10/3/99

(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 1598 Signed [Signature] Date 10/30/99

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Corrections to the log are: Section (5) "Sacks or pounds" changed to 6.5 Yards and Deleted the 2nd line in the same area. Deleted info in area of "other" and changed "Backfill placed from na to na" to 80' to 75' and in "Material" added Bentonite. Then in Section (11) added the information from 110' to 495' 1800 GPM and SWL 12'. Typed "AMMENDED" at the top of the log.

2-3-04

C. Jorgensen - Office