

**STATE OF OREGON**  
**WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

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

(1) **LAND OWNER** Well Number \_\_\_\_\_  
 Name Peila Ranch Inc  
 Address PO Box 697  
 City BURNS OR State OR Zip 97700

(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 340 ft.  
 Explosives used ☐ Yes ☒ No Type \_\_\_\_\_ Amount \_\_\_\_\_

| HOLE     |      |     | SEAL     |      |    |                 |
|----------|------|-----|----------|------|----|-----------------|
| Diameter | From | To  | Material | From | To | Sacks or pounds |
| 19"      | 0    | 39  | Damr     | 0    | 39 | 48              |
| 4"       | 39   | 340 | Cement   | 30   | 39 | 12 Cement       |

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E  
☐ Other 1/2 Hole Plug

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" | 11   | 39 | 250   | <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"/> |

Drive Shoe used ☐ Inside ☐ Outside ☐ None  
 Final location of shoe(s) \_\_\_\_\_

(7) **PERFORATIONS/SCREENS:**  
☐ 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"/> |

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

| Yield gal/min | Drawdown | Drill stem at | Time |
|---------------|----------|---------------|------|
| 1500          |          | 340           | 0.1  |

Temperature of water 50 ° Depth Artesian 340 ft. Found \_\_\_\_\_  
 Was a water analysis done? ☐ Yes By whom \_\_\_\_\_  
 Did any strata contain water not suitable for intended use? ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ \_\_\_\_\_  
 Depth of strata: \_\_\_\_\_

WELL I.D. # L 53599  
 START CARD # 144711

(9) **LOCATION OF WELL by legal description:**  
 County Lake Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 27 N or S Range 23 E or W. WM.  
 Section 17 1/4 NE 1/4  
 Tax Lot 200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) NO ADDRESSES ASSIGNED BUTYLALE Y Rd

(10) **STATIC WATER LEVEL:**  
70 ft. below land surface. Date 9-10-02  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) **WATER BEARING ZONES:**  
 Depth at which water was first found \_\_\_\_\_

| From | To  | Estimated Flow Rate | SWL |
|------|-----|---------------------|-----|
| 90   | 91" | 200 gpm             | 70' |
|      |     |                     |     |
|      |     |                     |     |
|      |     |                     |     |
|      |     |                     |     |
|      |     |                     |     |

(12) **WELL LOG:**  
 Ground Elevation \_\_\_\_\_

| Material             | From | To  | SWL |
|----------------------|------|-----|-----|
| TOP Soil             | 0    | 2   |     |
| Brown clay stonehead | 2    | 42  |     |
| gray Lava Rock       | 42   | 86  |     |
| gravel with Pumice   | 86   | 90  |     |
| Lava Rock Brown      | 90   | 125 |     |
| Red Lava Rock        | 125  | 140 |     |
| gray Basalt          | 140  | 166 |     |
| Pinkish Lava Rock    | 146  | 176 |     |
| with Pumice          |      |     |     |
| Brown Lava Rock      | 176  | 180 |     |
| Pinkish Lava Rock    | 180  | 300 |     |
| Brown Lava Rock      | 300  | 340 |     |

Date started 9-30-02 Completed 9-10-02

(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 Th... Date 10-3-02