

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 RANDY HYDE
 Address HC 60 Box 1878
 City 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 _____

(4) PROPOSED USE:

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

(5) BORE HOLE CONSTRUCTION:

 Special Construction approval ☐ Yes ☒ No Depth of Completed Well 290 ft.
 Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
20"	0	18	BENTONITE	0	18	29
12"	18	290				
10"	290	340				

 How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other POURED DRY

 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from -145 ft. to 290 ft. Size of gravel 16/30

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 16"	+1	19	250	☒	☐	☐	☐
Liner: 12"	+1 1/2	290	250	☒	☐	☒	☐
8"	-142	170	250	☒	☐	☒	☐

 Drive Shoe used ☐ Inside ☒ Outside ☐ None
 Final location of shoe(s) 19'

(7) PERFORATIONS/SCREENS:

☒ Perforations Method PERFORATOR
☒ Screens Type _____ Material STAINLESS STEEL

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
-170	290	3/16 x 1"	2880		12"	☐	☒
-170	290	*20			8"	☐	☐

 ANNULAR SPACE BETWEEN 8" SCREEN ☐
 +12" LINER PACKED WITH 16/30 SILICA SAND ☐
(8) WELL TESTS: Minimum testing time is 1 hour 14,200 lbs.

Yield gal/min	Drawdown	Drill stem at	Time
400		140	1 hr.

 Temperature of water 57° 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: _____

LAKE 51479

 WELL I.D. # L 43847-63847
 START CARD # 157493

(9) LOCATION OF WELL by legal description:

 County LAKE Latitude _____ Longitude _____
 Township 39 N or S Range 19 E or W. WM.
 Section 21 NW 1/4 NE 1/4
 Tax Lot 1000 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Co. Rd. 1-13

(10) STATIC WATER LEVEL:

0 ft. below land surface. Date 11-18-03
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

 Depth at which water was first found 10'

From	To	Estimated Flow Rate	SWL
10	290	400 +	0

(12) WELL LOG:

 Ground Elevation 4800

Material	From	To	SWL
CLAY TOPSOIL	0	3	
BRN. CLAY	3	6	
GRAY CLAY	6	10	
BRN SAND/GRAVEL	10	32	1
BLK. SAND/GRAVEL WITH	32	2	
GREEN CLAY STREAKS	2	47	
FINE BLK SAND WITH	47	2	
CLAY STREAKS	2	185	
MED-FINE SAND WITH	185	2	
THIN LAYERS GRAY CLAY	2	340	0

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MAR 15 2004

 WATER RESOURCES DEPT
 SALEM, OREGON

 WATER RESOURCES DEPT
 SALEM, OREGON

 Date started 8-02-03 Completed 2-29-04

(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.

 Signed Charles Fry WWC Number 1739
 Date 3-12-04

(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.

 Signed Arthur L. Fry WWC Number 1355
 Date 3-12-04