

WELL LABEL # L _____

START CARD # 209512

(1) LAND OWNER Owner Well I.D. 33/18-23G

First Name Ross Last Name Colhan
Company _____
Address 38650 HWY 31
City Paisley State Or Zip 97636

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

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

(4) PROPOSED USE Domestic ~~Industrial~~ Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well _____ ft.

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	
			<u>WEST CEMENT</u>	<u>23</u>	<u>35</u>	

How was seal placed: Method A B C D E

Other _____

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type _____ Material _____

Perf/S creen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

Pump Bailor Air Flowing Artesian

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

Temperature _____ °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

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SALEM, OR

(9) LOCATION OF WELL (legal description)

County LAKE Twp 33 S N/S Range 18 E E/W WM

Sec 23 SW 1/4 of the NE 1/4 Tax Lot 1300

Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD

Long _____ " or _____ DMS or DD

Street address of well Nearest address

1-1/2 miles NW of Paisley, Oregon

(10) STATIC WATER LEVEL

Date _____ SWL(psi) _____ + SWL(ft) _____

Existing Well / Predeepening _____

Completed Well _____

Flowing Artesian? Dry Hole?

WATER BEARING ZONES _____ Depth water was first found _____

SWL Date From To Est Flow SWL(psi) + SWL(ft)

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(11) WELL LOG

Ground Elevation _____

Material _____ From _____ To _____

Remove original puddled
clay seal with overshot -
replace with 24" cement
seal to 23'

Date Started 7-30-14 Completed 7-30-14

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number _____ Date _____

Password : (if filing electronically) _____

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1946 Date 11-12-14

Password : (if filing electronically) _____

Signed [Signature]

Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

(5) BORE HOLE CONSTRUCTION

BORE HOLE			Material	SEAL		Amt	sacks/ lbs
Dia	From	To		From	To		

FILTER PACK

From	To	Material	Size

(10) STATIC WATER LEVEL

Water Bearing Zones

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
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○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			
○ ○						○ ○			

(11) WELL LOG

Material	From	To

(7) PERFORATIONS/SCREENS

Perf/S creen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

Water Quality Concerns

From	To	Description	Amount	Units

Comments/Remarks

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LAKE 52582



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

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AUG 10 2015

SALEM, OR

Application for
Well ID Number

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name (please print): Colahan Enterprises
Mailing Address: PO Box 300
City, State, Zip: Paisley, Oregon 97636
Mail Well ID Tag to: SAME AS ABOVE In Care Of (C/O)
Name & Address: Attn: Lynn Culp, Surprise Valley Electrification Corp. (SVEC); 516 US Highway 395 E.
City, State, Zip: Alturas, CA, 96101

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 33S (North / South) Range: 18E (East / West) Section: 23
Tax Lot: 1300 County Lake SW 1/4 of the NW 1/4
GPS Coordinates: already assigned OWRD well log numbers: LAKE 1628/1626/52582 - but no ID #
Street Address of Well, City: → 42.697274 - 120.55813
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Please fill out as completely as possible)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): irrigation; application pending for industrial
Date Well Constructed (or property built): April 1964 Total Well Depth: current 270' Casing Diameter: 16"
Owner at time the well was constructed (if known): Ross Colahan
Other Information: Well name: Little Hot Well

SUBMITTED BY (please print): Lynn Culp / Surprise Valley Electric Corp.
PHONE: (530) 233-3511 EMAIL &/or FAX: lynnsvec@frontier.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

8-10-15

Well Log Number:

LAKE 1628 (ORIG.)
LAKE 1626 (DEEP.)
LAKE 52582 (ALT.)

Well Identification #:

L-119826

Well I.D. Number/2