

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

LAKE 52862

10/22/2018

WELL I.D. LABEL# L

START CARD #

ORIGINAL LOG #

130897

1040686

(1) LAND OWNER

Owner Well I.D. _____

First Name CONONE Last Name DAVISCompany CNC HOMESAddress 61345 WARD RDCity BEND State OR Zip 97702**(2) TYPE OF WORK**☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing: Dia + From To Gauge Stl Plstc Wld Thrld
Material From To Amt sacks/lbs
Seal: _____

(3) DRILL METHOD
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other _____
(4) PROPOSED USE
☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____
(5) BORE HOLE CONSTRUCTIONSpecial Standard ☐ (Attach copy)Depth of Completed Well 504.00 ft.

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	
17.5	0	240	Bentonite Chips	0	197	240 S
14	240	504	Calculated			211
			Cement	197	240	35 S
			Calculated			28

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

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

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

Explosives used: ☐ Yes Type _____ Amount _____**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrld
☒	☐	12	☒	2	500	.250	☒	☐	☒	☐
☒	☐	12	☐	500	504	.375	☒	☐	☒	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____Temp casing ☒ Yes Dia 18 From + 0 To 19**(7) PERFORATIONS/SCREENS**Perforations Method MACHINE

Screens Type _____ Material _____

Perf/	Casing/	Screen	Dia	From	To	Scrn/slot	Slot	# of	Tele/
Screen	Liner					width	length	slots	pipe size
Perf	Casing	12	460	500	.125	3	912		

(8) WELL TESTS: Minimum testing time is 1 hour☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
400		500	2

Temperature 61 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 145 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County LAKE Twp 24.00 S N/S Range 22.00 E E/W WMSec 22 NW 1/4 of the SW 1/4 Tax Lot 1600

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 43.47313889 DMS or DD

Long _____ ° _____ ' _____ " or -120.07580556 DMS or DD

☐ Street address of well ☒ Nearest address

GLASS BUTTE

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	10/10/2018			287
Flowing Artesian? ☐ Dry Hole? ☐				

WATER BEARING ZONESDepth water was first found 445.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
9/26/2018	445	504	400			287

(11) WELL LOGGround Elevation 4551.00

Material	From	To
SAND GRAVELS	0	16
SANDSTONE LIGHT BROWN	16	184
BASALT LAVA BROKEM	184	214
BASALT GRAY FRACTURED	214	235
BASALT GRAY HARD	235	250
BASALT GRAY HARD FRACTURED	250	294
RYHOLITE RED BROWN	294	314
BASALT GRAY FRACTURED	314	416
BASALT BROWN BROKEN	416	445
SANDSTONE CONGLOMERATE QUARTZ	445	492
BASALT VESICULAR	492	504

Date Started 9/24/2018 Completed 10/10/2018**(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 758 Date 10/18/2018Signed THOMAS PECK (E-filed)**(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 1720 Date 10/22/2018Signed JACK ABBAS (E-filed)

Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT

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

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

LAKE 52862

10/22/2018

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 43.47313889 Datum: WGS84

Longitude: -120.07580556

Township/Range/Section/Quarter-Quarter Section:

WM 24S 22E 22 NWSW

Address of Well:

GLASS BUTTE

Well Label: 130897

Printed: October 18, 2018

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

