

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

576-2532

WELL ID#

(START CARD) # 102018

(1) OWNER:

Name Mr. Don McCord / Stutzman Farms
Address P.O. Box 378
City Christmas Valley State OR Zip 97641

Well Number: MULLON

(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 795 ft.
Explosives used Yes No Type _____ Amount _____

MOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
18	0	158	Cement	62	158	66 sacks
12.75	158	633				
8.75	633	795				

How was seal placed: Method A B C D E

Backfill placed from 0 ft. to 62 ft. Material 57 sacks.
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	14in	+2	158	.250	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Telephone size	Screening	Other

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
1000+	5'+	760	1 hr.

Temperature of Water 58 Depth Artesian Flow found _____
Was a water analysis done? Yes No By whom _____

Did any strata contain water not suitable for intended use? Too Salty Muddy Oily Colored Other _____

Depth of strata: 55

(9) LOCATION OF WELL by legal description:

County _____ Lake _____ Latitude _____ Longitude _____
Township 28S N or S. Range _____ E or W. of W.M.
Section 31 CENTER 1/4 NW 1/4
Tax lot 3100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:

23 ft. below land surface. Date 6/8/1998
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth of which water was first found <u>46</u>			
From	To	Estimated Flow Rate	SWL
48	138	50+	27
413	795	2000+	23

(12) WELL LOG:

Material	From	To	SWL
Brown Sandy Loam	0	3	
Brown Shale	3	18	
Brown Claystone	18	28	
Gray Claystone	28	46	
Soft Silty Claystone WB	46	121	27
Black Sandstone WB	121	138	27
Gray Shalestone	138	258	
Blue Shale	258	327	
Gray Shale	327	413	23
White Pumice WB	413	414	23
Gray Conglomerate WB	414	646	23
Broken Gray Volcanics WB	646	663	23
Broken Basalt WB	663	667	23
Broken Basalt with Hard Layers & Strips of Cinders WB	667	795	23

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SEP 18 2023
QWRD

Date started 6/1/1998 Completed 6/8/1998

(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 my best knowledge and belief.

Signed _____ WWC Number _____
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.

Signed Robert Buckner WWC Number 1335
Date 6/15/1998



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301
 (503) 986-0900
 www.oregon.gov/owrd

Application for Well ID Number

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

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OCT 23 2023

I. OWNER INFORMATION

Current Owner Name (please print): Donald McCord OWRD
 Mailing Address: PO Box 376
 City, State, Zip: Christmas Valley, OR 97641
 Mail Well ID to: SAME AS ABOVE In Care Of (C/O)
 Name & Address: _____
 City, State, Zip: _____

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

Township: 26S (North / South) Range: 17E (East / West) Section: 31 SE 1/4 of the NW 1/4
 Tax Lot (usually last 3-5 numbers of Tax Map #): 3100 County LAKE
 GPS Coordinates: 43.277888, -120.755051
 Street Address of Well, City: NO SITUS ADDRESS ASSIGNED .2 mi E of Wagon Wheel Rd
 If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): IRRIGATION
 Date Well Constructed (or property built): 6/1/1998 Total Well Depth: 795' Casing Diameter: 14"
 Owner at time the well was constructed (if known): DONALD MCCORD Well Report # (if known): _____
 Other Information: START CARD #102018, DRILLED BY ROBERT BUCKNER, LOG NOT FILED AT TIME OF CONSTRUCTION
-ALSO NO WELL ID ATTACHED-

SUBMITTED BY (please print): BRYCE WITHERS/WATER RIGHT SERVICES, LLC
 PHONE: 541-408-1400 EMAIL &/or FAX: brycewrs@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
 Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date: <u>10-23-2023</u>	Well Report Number: <u>LAKE 53393</u>	Well Identification #: <u>L-153423</u>
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- copy of LOG provided BY WRD NW REGION MGR -