

STATE OF OREGON  
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 16181  
START CARD # 148407

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

(1) LAND OWNER Well Number 16181  
Name Johnny Pugh  
Address 5621 O Willis St  
City Brogan State OK Zip 97903

(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 360 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>12</u>	<u>97</u>	<u>200</u>				
<u>10</u>	<u>200</u>	<u>360</u>				

How was seal placed: Method  A  B  C  D  E  
 Other

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>10"</u>	<u>60</u>	<u>200</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) 200 ft

(7) PERFORATIONS/SCREENS:

Perforations Method torch  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>160</u>	<u>200</u>	<u>6"</u>	<u>400</u>	<u>1/4</u>	<u>10"</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>400 gpm</u>	<u>175 ft</u>		<u>1 hr.</u>
			<u>4 hrs</u>

Temperature of water 58° 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: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County Malheur Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 15 S N or S Range 42 E E or W. WM.  
Section 13 NW 1/4 SW 1/4  
Tax Lot 100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Logan Rd Brogan, OK

(10) STATIC WATER LEVEL:  
24 ft. below land surface. Date 7-2-02  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
<u>97</u>	<u>200</u>	<u>400 gpm</u>	<u>24</u>

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
<u>Sandy Bn clay gravel</u>	<u>97</u>	<u>200</u>	<u>24</u>
<u>Sandy Bn clay</u>	<u>200</u>	<u>360</u>	<u>24</u>

RECEIVED

AUG 18 2002

WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 6-27-02 Completed 7-2-02

(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.  
WVC 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.  
WVC Number 485  
Signed Jon M Jho Date 8-2-02