

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 87516

START CARD # 190256

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

(1) LAND OWNER Owner Well I.D. _____
First Name Primo Last Name Mussi
Company _____
Address 6760 Mussi Rd
City Trouside State Or Zip 97908

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard: Yes (attach copy)
Depth of Completed Well 500 ft.

BORE HOLE			SEAL			
Dia	From	To	Material	From	To	Amount (cks/lbs)
16"	0	30'	Bentonite	0	30	41
16"	30	500'				

How was seal placed: Method A B C D E
 Other Pour
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

Csng	Lnr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
✓		12	2'	0	30	250	✓			
	✓	10	-10	500		1/2		✓		

Shoe Inside Outside Other Location of shoe(s) _____
Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method existing
Screens Type _____ Material _____

Perf	Scrn	Csng	Lnr	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size

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

(9) LOCATION OF WELL (legal description)
County Malheur Twp 13 N or S Range 40 E or W W.M.
Sec 27 NW 1/4 of the 5E 1/4 Tax Lot 600
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD

Street Address of Well (or nearest address) 6760 Mussi Rd Trouside Or

	Date	SWL(psi)	+	SWL (ft)
Existing Well/Predeepening				
Completed Well				

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found _____

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

(11) WELL LOG Ground Elevation _____

Material	From	To
<u>used a 12" x 250 wall casing (steel) to over shot the 10" PVC existing well casing. Welded 2" teeth on out side of 12" casing to make a 4" annular space for the bentonite seal</u>		
<u>Bob Manard from the Baker City water master office was on sit for the well repair and approved all construction repairs on this well.</u>		

Date Started 6-18-07 Completed 6-19-07

(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 _____
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 1606 Date 8-10-07
Signed John Marciel
Contact Info. (optional) _____

RECEIVED

AUG 27 2007

WATER RESOURCES DEPT