

Amended **MAIL 53857**

Mail 53857

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

WELL LABEL # L 28

START CARD # 206893

**(1) LAND OWNER** Owner Well I.D. \_\_\_\_\_

First Name Farewell Bend Mng Last Name \_\_\_\_\_  
Company Oregon Parks & Recreation  
Address 23751 Old Hwy 30  
City Huntington State Or Zip 97907

**(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  
 Thermal  Injection  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard  Attach copy) \_\_\_\_\_  
Depth of Completed Well 38 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
10	0	18	Bentonite	0	18	750	P
10	18	30					
6	30	40					

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

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_

Filter pack from 18 ft. to 40 ft. Material CSS Size 6/9

Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(6) CASING/LINER**

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	6		1.5	7	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4		1	40	f480	<input type="checkbox"/>	<input checked="" 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 Slotted Material PVC

Perf/S	Casing/Screen	Liner	Dia	From	To	Scm/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Liner	4	24	38	.02				4

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
7		38	4
15	5		2

Temperature 60 °F Lab analysis  Yes By \_\_\_\_\_

Water quality concerns?  Yes (describe below)

From	To	Description	Amount	Units

**(9) LOCATION OF WELL (legal description)**

County BAKER Twp 14 S N/S Range 45 E E/W WM  
Sec 32 SE 1/4 of the SE 1/4 Tax Lot 301  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address

23751 Old Hwy 30 Huntington Or 97907

**(10) STATIC WATER LEVEL**

Date	SWL(psi)	+ SWL(ft)
Existing Well / Predeepening		
Completed Well	05-05-2011	25

Flowing Artesian?  Dry Hole?

**WATER BEARING ZONES**

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
05-05-2011	25	28	7		25

**(11) WELL LOG**

Material	From	To
Brown Silty Dirt	0	6
Boulders & Clay	6	14
Harad Sandy Clay	14	19
Sand	19	24
Silt, Sand, Gravel	24	27
Blue Clay	27	40

**RECEIVED**  
**JUN 20 2011**  
**WATER RESOURCES DEPT**  
**SALEM, OREGON**

Date Started 05-04-2011 Completed 05-05-2011

**(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 682 Date 06-16-2011

Password : (if filing electronically) \_\_\_\_\_

Signed \_\_\_\_\_

Contact Info (optional) \_\_\_\_\_

# MALH 53857

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WATER BEARING ZONES Depth water was first found 25

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
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License Number 682 Date 05-09-2011  
 Password : (if filing electronically) \_\_\_\_\_  
 Signed [Signature]  
 Contact Info (optional) \_\_\_\_\_

*ARC Pump*