

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

WELL I.D. # L 82021START CARD # 183319

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

(1) LAND OWNER Well Number _____
Name Matt Julian
Address P.O. Box 788
City Lakeview State OR Zip 97630

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

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

(4) PROPOSED USE
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☒ No
Depth of Completed Well 145 ft.
Explosives used: ☐ Yes ☒ No Type _____ Amount _____

BORE HOLE			SEAL		
Diameter	From	To	Material	From	To
10"	0	18'	Bentonite	0	18'
6"	18'	145'			

Sacks or Pounds 17

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

☒ Other paused dry
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: 6"	+2	145'	0.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used ☐ Inside ☐ Outside ☒ None

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS
☒ Perforations Method torch
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
110'	145'		108			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
24		140'	1 hr.

Temperature of water 53° Depth Artesian Flow Found _____

Was a water analysis done? ☐ Yes By whom _____

☒ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

RECEIVED FEB 27 2009 JUL 30 2007

(9) LOCATION OF WELL (legal description)

County Lake
Tax Lot 2610 Lot _____
Township 38 North Range 20 East or W WM
Section 21 NE 1/4 NE 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 19308 Hwy 395 N
Lakeview, OR 97630

(10) STATIC WATER LEVEL

97' ft. below land surface. Date 7/15/07
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found 125'

From	To	Estimated Flow Rate	SWL
125'	135'	24 gpm	97'

(12) WELL LOG

Material	From	To	SWL
brown sandy gravel	0	15'	
brown sandy clay/gravel	15'	20'	
brown sandy gravel	20'	25'	
brown sandy clay	25'	40'	
brown sandy clay/gravel	40'	70'	97'
		145'	

Date Started 7/3/07 Completed 7/15/07

(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.

WWC 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.

WWC Number 1716 Date 7/23/07

Signed Sonda London