

Well 2

RECEIVED

WATER WELL REPORT  
STATE OF OREGON  
(Please type or print)  
WATER RESOURCES DEPARTMENT  
SALEM, OREGON

BAKER  
370

State Well No. 8539E16  
State Permit No.

This report is to be filed with the  
STATE ENGINEER, SALEM, OREGON 97118  
within 30 days from the date  
of well completion.

(1) OWNER:  
Name Bakerford Bros  
Address BAKER, ORE

(2) TYPE OF WORK (check):  
 New Well  Deepening  Reconditioning  Abandon   
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:  
 Driven  Jetted  Bored   
(4) PROPOSED USE (check):  
 Domestic  Industrial  Municipal   
 Irrigation  Test Well  Other

(5) CASING INSTALLED:  
Threaded  Welded   
Diam. from 0 ft. to 5.00 ft. Gage 2.5  
Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_  
Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_

(6) PERFORATIONS:  
Type of perforator used Factory perf.  
Size of perforations 1/4 in. by 3 in.  
perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

(7) SCREENS:  
Well screen installed?  Yes  No  
Manufacturer's Name \_\_\_\_\_ Model No. \_\_\_\_\_  
Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

(8) WELL TESTS:  
Drawdown is amount water level is lowered below static level  
Pump test made?  Yes  No. If yes, by whom?  
\_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.  
\_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.  
\_\_\_\_\_ gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.

Temperature of water \_\_\_\_\_ Depth artesian flow encountered \_\_\_\_\_ ft.

(9) CONSTRUCTION:  
Well seal - Material used Cement  
Seal extended from land surface to \_\_\_\_\_ ft.  
Seal extended from well bore to bottom of seal \_\_\_\_\_ in.  
Diameter of well bore below seal \_\_\_\_\_ in.  
Number of sacks of cement used in well seal \_\_\_\_\_ sacks  
Number of sacks of bentonite used in well seal \_\_\_\_\_ sacks  
Brand name of bentonite \_\_\_\_\_  
Number of pounds of bentonite per 100 gallons \_\_\_\_\_  
of water \_\_\_\_\_ lbs./100 gals.  
Was a drive shoe used?  Yes  No. Plugs \_\_\_\_\_ Size: location \_\_\_\_\_ ft.  
Did any strata contain unusable water?  Yes  No  
Type of water? \_\_\_\_\_ depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_  
Was well gravel packed?  Yes  No Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

(10) LOCATION OF WELL:  
County BAKER Driller's well number \_\_\_\_\_  
NW 1/4 Section 16 T. 85 N. 39 E. W2  
Bearing and distance from section or subdivision corner  
N 131° S. 40 E. of NW corner  
of above.

(11) WATER LEVEL: Completed well.  
Depth at which water was first found \_\_\_\_\_  
Static level 12 ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lbs. per square inch. Date \_\_\_\_\_

(12) WELL LOG: Diameter of well below casing \_\_\_\_\_  
Depth drilled 500 ft. Depth of completed well 500 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Topsoil	0	2	
Clay, brown	2	8	
" " " " " "	8	118	
Green sandy clay	118	124	
" " clay, gravel	124	155	
tan coarse to medium	155	215	
" " " " " "	215	238	
Clay, sandy	238	305	
Sand, medium	305	380	
Clay w/strks of sand	380	430	
occ. boulders	430	438	
Sand	438	500	
Sand, streaks of clay	500		

Work started 3/2 1973 Completed 4/15 1973  
Date well drilling machine moved off of well \_\_\_\_\_

Drilling Machine Operator's Certification:  
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.  
(Signed) J. J. [Signature] Date 5/15 1973  
(Drilling Machine Operator)  
Drilling Machine Operator's License No. 377

Water Well Contractor's Certification:  
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.  
Name CHARLES SEDGWICK INC.  
(Person, firm or corporation) (Type or print)  
Address 205 LINCOLN AVE  
(Signed) \_\_\_\_\_  
(Water Well Contractor)  
Contractor's License No. 517 Date 5/15 1973

Well 2 - Deepening

BAKE 51881

BAKE 51881

NOV 14 2013

STATE OF OREGON  
WATER SUPPLY WELL REPORT

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

WATER RESOURCES DEPT  
SALEM, OREGON

WELL LABEL # L 96110

START CARD # 198617

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

First Name Don Last Name Blochford  
Company Blochford Farms  
Address 248 1/2 Brown Ln  
City Baker City State OR Zip 97614

(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 763 ft.

BORE HOLE			SEAL		sacks/ Amt lbs
Dia	From	To	Material	To	
10	483	763	Exp. Phase		

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

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_

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"/>	10	483	763	250	4		4	

Shoe  Inside  Outside  Other Location of shoe(s) Ring A.T  
Temp casing  Yes Dia \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

(7) PERFORATIONS/SCREENS

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

Perf/S	Screen	Liner	Dia	From	To	Scrns/slot width	Slot length	# of slots	Tele/ pipe size
	<input checked="" type="checkbox"/>		10	483	763	4x6	2"	3000	10"

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

Pump  Bailor  Air  Flowing Artesian  
Yield gal/min 1000 Drawdown 760 Drill stem/Pump depth 2 hrs Duration (hr)

Temperature 53 °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 83 N/S Range 39E E/W WM  
Sec 16 NW 1/4 of the SW 1/4 Tax Lot 4503  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address  
448 1/2 Brown Rd Baker City

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+ SWL (ft)
Existing Well / Predeepening	<u>5-28-08</u>		<u>37'</u>
Completed Well	<u>5-30-08</u>		<u>37'</u>

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found 483

SWL Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
	<u>483</u>	<u>763</u>	<u>300</u>		<u>37</u>

(11) WELL LOG

Material	From	To	Ground Elevation
<u>Yellow Sand of Gravel</u>	<u>483</u>	<u>755</u>	
<u>Granite (Decomposed)</u>	<u>755</u>	<u>763</u>	

Date Started 5-28-08 Completed 5-30-08

(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 1737 Date 6-10-08  
Password: (if filing electronically) \_\_\_\_\_  
Signed Metal J. H.

(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 415 Date 6-10-08  
Password: (if filing electronically) \_\_\_\_\_  
Signed Robert V. Staffer  
Contact Info (optional) \_\_\_\_\_

1011684

Proposed Well 5

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JUN 16 1993

15642  
1950

83/39E/206

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

WATER RESOURCES DEPT.

(START CARD) # 47584

(1) OWNER: Blatchford Bros.  
Name: Blatchford Bros.  
Address: RT 1 Box 54 Baker City  
City: Baker State: OR Zip: 97004

Well Number: SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County: Baker Latitude: Longitude:  
Township: 83 Nor S. Range: 37E E or W. WM.  
Section: 20 SE 1/4 SE 1/4  
Tax Lot: Lot: Block: Subdivision:  
Street Address of Well (or nearest address): 1/2 mi South of above address

(2) TYPE OF WORK:

New Well  Deepen  Recondition  Abandon

(3) DRILL METHOD

Rotary Air  Rotary M  Other

(4) PROPOSED USE:

Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Other

DRAFT

(10) STATIC WATER LEVEL:

70 ft. below land surface. Date: 4-30-93  
Artesian pressure: lb. per square inch. Date:

(11) WATER BEARING ZONES:

Depth at which water was first found: 33

From	To	Estimated Flow Rate	SWL
33	35	30	20
130	133	20	53
240	270	40	50
450	465	50	

(12) WELL LOG:

Ground elevation:

Material	From	To	SWL
gravel & clay	0	33	
fine clean gravel & clay	33	35	20
clay & gravel	85	130	
gravel & clay	130	135	50
clay & gravel	135	240	
gravel & clay	240	270	50
clay & gravel	270	450	
gravel & clay	450	465	70

(5) BORE HOLE CONSTRUCTION:

Special Construction approval: Yes No  Depth of Completed Well: \_\_\_\_\_ ft.

Explosives used: Yes No  Type: \_\_\_\_\_ Amount: \_\_\_\_\_

HOLE Diameter	From	To	SEAL		Amount sacks or pounds
			Material	From To	
14	0	18	Bentonite	0	15
10	18	270			
8	270	464			

How was seal placed: Method  A  B  C  D  E

Other: Poured & rapped

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

Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel: \_\_\_\_\_

(6) CASING/LINER:

Casing/Liner Diameter	From	To	Gauge	Material			
				Steel	Plastic	Welded	Threaded
10	0	270	2.50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8	260	464	2.50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of sheets: 270-10" 464-8"

(7) PERFORATIONS/SCREENS:

Perforations Method: Half Type  
 Screens Type: \_\_\_\_\_ Material: \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
463	260	1/8	2400	8		<input checked="" type="checkbox"/>	<input type="checkbox"/>
260	30	1/8	2600	10		<input 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
250		250	1 hr.

Temperature of water: 52 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: \_\_\_\_\_

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NOV 14 1993

WATER RESOURCES DEPT  
SALEM, OREGON

Date started: 3-8-93 Completed: 4-30-93

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed: Carl Pitek WWC Number: 494 Date: 6-7-93

(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 well construction standards. This report is true to the best of my knowledge and belief.

Signed: Carl Pitek WWC Number: 494 Date: 6-1-93

1011684