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#9

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 337.765)

WATER RESOURCES DEPT. SALEM, OREGON WELLID. # L. 4-28434

Instructions for con-	pleting this re	port are on	the inst p	rage of this for	T10.	I		714007		
(1) OWNER: Well Number				(9) LOCATION OF WELL by legal description:						
andy Ro							Y Latitude		witude	
ddress PO Box	_3						N or S Range			W. WM
ity Burns		StateOR		Zip 97	720		SE 1/4	SE	1/4	
2) TYPE OF WOR				_			otBiock_			
New Well Deepe DRILL METHO		ation (repair/r	oconditio	n) Abendo	ament	Street Address of Wei	il (or nearest address)	Cow Cr	eek	Rd
Rotary Air Re		Cable	Auge	r		(10) STATIC WATE				
Other () PROPOSED US							low land surface.		Date 2 -	20-9
Domentic C		Industrial	E M in	rigation		Artesian pressure (11) WATER BEAR		re inch. I	Date	-
		Livestock	<u> </u>	ther		i				
5) BORE HOLE C				-1 - 1 Tr 11 /	0.50	Depth at which water wa	s first found	30		
Special Construction ap						Daniel Branch	1	Dad	Dam Det	1
ixplosives used Ye	KN40 JA	SEAL		10 mil		From 30	55	50	Flow Rate	SW 1
HOLE	3.5.44		_			90		750	W	
Mameter From To				20 sac] - 30	405	120		20
18 0 18 14 18425	cemen	<u> </u>	그이	ZU SAC	KS.					
10923	 					l 	DECEIVED	100000000000000000000000000000000000000	A ##4.	\dashv
						(12) WELLLOG:	HEUDIVED			
low was seal placed:	Method		B vv	C D	□E		d Elevation			
Other							APR 29	2014		
Backfill placed from	fl. to_	n.	Materia	ii		Materi	al	Prom	To	SWL
iravel placed from	ft. to_	fi.	Size of	grevol		topsoil cla		10	1_1	
6) CASING/LINE	R:					clay brn	SALEM		4	
Diameter F	rem To C	Garage Steel	Plestic		readed	sand med		4	10	
neing: 14 +	1 78	250 **		13		clay brn		10	22	-
						clay blk		22	30	1
						sand/clay,b		30	38	18
						clay grey		38	44	18
iner:						sand med		44	55	18
	لللل					clay grey		55	72	18_
inal location of shoe(s						clay green		72	90	18
) PERFORATION						<u>claystone</u> g	reen soft	90	150	20
Perforations	Method					clay grey		150	170	
Screens				orial		clay, green/		170	285	_
	et m ¡Number	Diameter	Tolo/pip	Carles	Liner	pumice grey		285		
	-+-		<u> </u>	_ 📴	_	conglomerat				20
				_ 🛚		<u>broken rock</u>		365	405	20
				_ 📙		clay brn (s	ticky)	405	425	20_
		 	 	_ 🛚						+
		<u> </u>	<u> </u>	_ U					 	+
B) WELL TESTS:	Minimum te	esting time	is 1 hou	r		Date started 2-4-9	9 Com	pleted2 - 20	-99	1
				Flowin	Æ	(unbended) Water Well				
	Bailer	Air		Artesia		I certify that the work of this well is in compliant	I performed on the con	struction, after	ration, or al	mandonm Amelyanta
	Drawdown	Drill ster		Tim		Materials used and inform	mation reported above a	re true to the i	ost of my	powied
750	180	200			<u>v</u>	and belief.		gau		
		 				l		WWC Nu	-	
		l	m Diam C	lound		Signed	onstructor Cartification		Date	
	55	Dunth America		ULLIU		i (nomina) were well (WHEN MANUE COLUMN			
Tomperature of water_		Depth Artesia				I seemed managed the	for the construction of			-
Tomperature of water	no 🗆 Y	es By whom				performed on this well d	for the construction, aluring the construction d	ates reported a	hove. All	work ·
Temperature of water	ne? no 🔲 Y	for By whom to for intende	d use?	Too little	e	performed on this well do performed during this time	uring the construction d no is in compliance with	ates reported a Oregon water	bove. Ali r supply w	work
Temperature of water	ne? no 🔲 Y	for By whom to for intende	d use?		e	performed on this well d	uring the construction d no is in compliance with	ates reported a Oregon water	bove. Ali r supply we owiedge as	work H

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

12-22-2009

WELL LABEL # L 102504

	START CARD # 1008916					
(1) LAND OWNER Owner Well I.D. Twin Sheds	(9) LOCATION OF WELL (legal description)					
	(9) LOCATION OF WELL (legal description) County Harney Two 22 00 S N/S Range 22 50 F E/W WM					
First Name Andy Last Name Root	111111111111111111111111111111111111111					
Company Rattlegnake Ranch Address 524 N Hwy 20	Sec 35 SW 1/4 of the NE 1/4 Tax Lot 2200 Tax Map Number Lot					
City Burns State or Zip 97720	Lat °O ' "or DMS or DD					
(2) TYPE OF WORK New Well Deepening Conversion	Long O O O DMS or					
Alteration (repair/recondition) Abandonment	Street address of well (Nearest address					
Alteration (repair/recondution) Abandon/nest	72163 Rattlesnake Road					
(3) DRILL METHOD						
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)					
Reverse Rotary Other	Existing Well / Predeepening SWL(psi) + SWL(ft)					
(4) PROPOSED USE Domestic Imigation Community	Completed Well 12-04-2009					
Industrial/ Commercial Livestock Dowstering	Flowing Artesian? Dry Hole?					
Thermal Injection Other	WATER BEARING ZONES Depth water was first found 60					
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy	SWL Date From To Est Flow SWL(psi) + SWL(ft)					
Depth of Completed Well 410.00 ft.	12-04-2009 60 410 500					
BORE HOLE SEAL sacks/ Dia From To Material From To Amt the						
16 0 18 Rentonite 0 18 30 S						
	(11) WELL LOG Ground Flagation					
	Croutin Dieveron					
How was seal placed: Method A B C D E	Material From To lopsoil, sandy loam 0 1					
Other poured dry and tam Backfill placed from ft. to ft. Material	clybrown RECEIVED BY OWRD 1 25					
Filter pack from fl. to fl. Material Size	clay grey 25 170					
Explosives used: Yes Type Amount	Livatione green 170 201					
	pumice grey claystone APR 2 9 2014 201 230 clystone green APR 2 9 2014 230 245					
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plate Wid Thrd	pumice grey 245 280					
○ ○ 12 × 2 80 250 ○ ○ ×	rock black 280 300					
	elayatone green SALEM, OR 300 340					
	sandstone brn 340 360 pumice brn BEOFILED 360 410					
R + H + H + H	RECEIVED 360 410					
Shoe Inside Outside Other Location of shoe(s)	FEB 0-8 2010					
Temp casing Yes Dia From To						
(7) PERFORATIONS/SCREENS	WATER RESOURCES DEPT					
Perforations Method Material	SALEM, OREGON					
Perf/S Casing/Surven Sorn/slot Slot # of Tele/ croon Liner Dia From To width length slots pipe size	Date Started 12-02-2009 Completed 12-04-2009					
	(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.					
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date					
Pump Bailer Air Flowing Artesian	Electronically Filed					
Yield sal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed					
100 100 1	(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					
Temperature 58 °F Lab analysis Yes By Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.					
Water quality concerns? Yes (describe below) From To Description Amount Units	License Number 1424 Date 12-22-2009					
	Electronically Filed					
	Signed TIMOTHY K RILEY (E-filed)					
	Contact Info (optional)					

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK
Form Version: 0.95

STATE OF OREGON	н	IARN	52018	WELL 1.1	D. LABEL	# 1 1134.	33	Page 1 bi 1
WATER SUPPLY WELL REPORT			22010	STAF	RT CARD	# 10220)46	
(as required by ORS 537.765 & OAR 690-205-0210)	#18	2/4/2	2014	ORIGIN	NAL LOG	#		
(1) LAND OWNER Owner Well I.D. MORTIM	R#1							
First Name ANDY Last Name ROOT		_	(9) LOCATI	ON OF WI	ELL (lega	l descri	ption)	
Company ACW			, .					E E/W WM
Address 524 N HWY 20	0	_	Sec 33 N					
City HINES State OR Zip 9773		=	Tax Map Numbe					
(2) TYPE OF WORK New Well Deepening	Conversi	ou .	Lat°_	" (or		Lot	DMS or DD
Alteration (complete 2a & 10) Abandor (2a) PRE-ALTERATION	iment(compl	iete Sa)	Long					DMS or DD
Dia + From To Gauge Stl Plstc Wld	Thrd			et address of w	rell (Nearest ac	idress	
Casing:			72163 RATTLE					
Material From To Amt sacks/lbs			BURNS, OREG	ON				
Seal: (3) DRILL METHOD			(10) STATIC	WATER	EVEL			
X Rotary Air Rotary Mud Cable Auger Cab	le Mud		` '		D	ate SV	VL(psi) +	SWL(ft)
Reverse Rotary Other	10 11144		Existing We	ll / Pre-Alterati				
			Completed \		1/27/20		◘ ليـــــ	62
(4) PROPOSED USE Domestic Irrigation Con	nmunity			Flowing	Artesian?) Dr	Hole?	
Industrial/Commercial Livestock Dewatering			WATER BEARD	NG ZONES	Depth	water was	s first found	62.00
Thermal Injection Other			SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standa	rd (Attac	ch copy)	1/27/2014	62	335	1000		62
Depth of Completed Well 335.00 ft.								
BORE HOLE SEAL		sacks/						
Dia From To Material From	To Amt	lbs						
18 0 18 Bentonite Chips 0	18 35	S		1				
14 10 555		1						
			(11) WELL L	.OG G	round Eleva	tion		
How was seal placed: Method A B C]D []E			Material			From	То
Nother POURED & TAMPED			Clay loom topso	il			0	2
			Clay Brown				2	10
Filter pack from ft. to ft. Material	-		Clay Grey Course Sand/sma	all uravel			10 35	62
Explosives used: Yes Type Amount			clay Green w/ Sr				62	78
(5a) ABANDONMENT USING UNHYDRATED BEN	TONITE		Claystone Green				78	165
Proposed Amount Actual Amount			Claystone Green	w/pumice grey	/		165	195
(6) CASING/LINER			Pumice				195	265
Casing Liner Dia + From To Gauge Stl		Thrd	Claystone Green				265 295	300
● C 14 🗵 1 105 .250 💽			Claystone Brown		stone fractu		300	320
	\Box		Claystone Grey Hard				320	335
	$\leftarrow \bowtie$		RECEIVED BY OWRD					
	H	1						
Shoe Inside Outside Other Location of sho							 	
Temp casing Yes Dia From	` `			APR	29 20	14		
	10							
(7) PERFORATIONS/SCREENS Perforations Method								
Screens Type Material			Date Started!	_{/22/2014} SA	LEM, O	mplete	1/27/2014	
Perf/ Casing/Screen Scrn/slot Slot	# of	Tele/				_		
Screen Liner Dia From To width length	slots pi	pe size	(unbonded) Wa				ion daanoni	ng, alteration, or
	+ +							ater supply well
	++							above are true to
			the best of my k					
	I		License Number	r		Date _		
(8) WELL TESTS: Minimum testing time is 1 hour			Cianad					
· · · · · · · · · · · · · · · · · · ·	owing Artes	ian	Signed					
	ration (hr)		(bonded) Water	Well Constru	ctor Certifi	cation		
1000 330	11		I accept respons	sibility for the	construction	, deepenii	ng, alteration	, or abandonmen
		_	work performed	on this well du	ring the cons	struction d	lates reported	l above. All work
			performed durir construction star	ig this time is	s in compli	ance With	of my knowle	ater supply well
Temperature 60 °F Lab analysis Ycs By			1		Ant in true to	Dat	III, KIRIWI	and theres.
Water quality concerns? Yes (describe below) TDS amoun	nits	License Number	1424		Date 2/A	2014		
Tom 10 Description 7	Amount Ur		Signed TIMO	THY K RILEY	(E-filed)			
			Contact Info (op			5695	101	803
			(-P					

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WELL I.D. LABEL# LI13434 STATE OF OREGON HARN 52021 START CARD # 1022156 WATER SUPPLY WELL REPORT **2**/26/2014 (as required by ORS 537.765 & OAR 690-205-0210) ORIGINAL LOG# (1) LAND OWNER Owner Well LD, MORTIMER #2 Last Name ROOT First Name ANDY (9) LOCATION OF WELL (legal description) Company ACW County HARNEY Twp 22.00 S N/S Range 32.50 E E/W WM Address 524 HWY 20 Sec 32 NW 1/4 of the NE 1/4 Tax Lot 2200 City HINES Zip 97738 State OR Tax Map Number (2) TYPE OF WORK New Well Deepening Conversion DMS or DD Alteration (complete 2a & 10) | Abandonment(complete 5a) DMS or DD (2a) PRE-ALTERATION (Street address of well Sti Piste Wid Thrd Gauge Casing: 72163 RATTLESNAKE RD BURNS, OR 97720 Material Amt_sacks/lbs From Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD SWL(psi) SWL(n) X Rotary Air Rotary Mud Cable Auger Cable Mud Existing Well / Pre-Alteration Reverse Rotary Other Completed Well 2/11/2014 Dry Hole? (4) PROPOSED USE Flowing Artesian? Domestic | | Irrigation | | | Community Industrial/ Commercial Livestock Dewatering Depth water was first found 62.00 WATER BEARING ZONES Thermal Injection Other SWL Date Est Flow SWL(psi) + SWL(ft) From To (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 2/11/2014 410 1000 Depth of Completed Well 410.00 ft. BORE HOLE SEAL sacks To Dia From To Material From Δmt lbs 18 0 18 Bentonite Chips 0 18 60 14 18 410 (11) WELL LOG Ground Elevation From Method To How was seal placed: Other POURED & TAMPED Clay loom topsoil Clay brown 2 23 Backfill placed from ____ __ ff_to ___ fl Material 23 56 Size Sand brown Filter pack from ___ __ ft. to ft. Material 56 62 Clay Tan Explosives used: Yes Type____ Claystone Tan 67 62 (5a) ABANDONMENT USING UNHYDRATED BENTONITE 67 83 Clay blue 83 150 **Actual Amount** Claystone green Proposed Amount 150 162 Clay Grey (6) CASING/LINER Casing Liner 275 162 Claystone green Dia Wld Thrd Pisto From Gauge Stl 275 360 Claystone green w/pumice \mathbf{X} 105 lacksquareX .250 Claystone green and black w/some pumice 360 385 Claystone black 385 397 410 RECEIVED BY OWRE Sandstone Black Other Location of shoe(s) Shoe inside Outside APR 29 2014 Temp casing Yes (7) PERFORATIONS/SCREENS SALEM: OF Perforations Method Screens Type _ Complete 2/11/2014 Date Started2/4/2014 Material # of Tele/ Perf/ Casing/Screen Sern/slot Slot (unbonded) Water Well Constructor Certification Screen Liner Dia From To width length slots pipe size 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 (8) WELL TESTS: Minimum testing time is I hour Signed Air O Pump Flowing Artesian O Bailer (bonded) Water Well Constructor Certification Drill stem/Pump depth Duration (hr) Yield gal/min Drawdown 1000

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 1424 Date 2/26/2014 Signed TIMOTHY K RILEY (E filed) Contact Info (optional) Tim Riley 541-573-5695

Amount Units

°F Lab analysis Yes By.

Yes (describe below) TDS amount

Description

Temperature 60

Water quality concerns?