Page 1 of 1 WELL I.D. LABEL# L 130028 STATE OF OREGON HARN 52717 START CARD# 1038335 WATER SUPPLY WELL REPORT 4/26/2018 (as required by ORS 537.765 & OAR 690-205-0210) ORIGINAL LOG# (1) LAND OWNER Owner Well I.D. First Name PHILLIP Last Name SINGHOSE (9) LOCATION OF WELL (legal description) Company County HARNEY Twp 24.00 S N/S Range 27.00 E E/W WM Address POBOX 55 Sec 9 SE 1/4 of the SE 1/4 Tax Lot 506 City RILEY State OR Zip 97758 Tax Map Number New Well (2) TYPE OF WORK Deepening " or 43.49808300 Alteration (complete 2a & 10) " or -119.47958300 DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address Casing: APPROX. 4 MI E OF RILEY OREGON From To Amt sacks/lbs Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD X Rotary Air Rotary Mud Cable Auger Cable Mud SWL(psi) SWL(ft) Existing Well / Pre-Alteration Reverse Rotary Other Completed Well Domestic Irrigation Flowing Artesian? (4) PROPOSED USE Industrial/ Commericial Livestock Dewatering WATER BEARING ZONES Depth water was first found 112.00 Thermal Injection X Other OBSERVATION SWL Date Est Flow SWL(psi) + SWL(ft) From To (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 4/11/2018 112 425 Depth of Completed Well 425.00 ft. **BORE HOLE** SEAL Dia From Material From To Amt lbs 10 0 57 57 27 425 Calculated 26.01 57 6 (11) WELL LOC Calculated How was seal placed: Method X Other POURED & TAGGED Backfill placed from ___ __ ft. to ___ _ ft. to _____ ft. Material Filter pack from Explosives used: Yes Type_ Amount (5a) ABANDONMENT USING UNHYDRATED BENTONITE Proposed Amount Actual Amount (6) CASING/LINER Dia Casing From Plstc To Gauge X

Inside Outside Other Location of shoe(s) Temp casing Yes Dia From (7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Perf/ Casing/ Screen Scrn/slot Slot # of Tele/ To slots From width length pipe size (8) WELL TESTS: Minimum testing time is 1 hour O Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 420 Temperature 55 °F Lab analysis Yes By Water quality concerns? Yes (describe below) TDS amount 341 ppm Description

Material	From	To
brown and sandy clay	0	4
black solid basalt	4	31
black & red fractured basalt	31	46
brown & black basalt	46	112
brown yellow tan fine silts combined	112	141
brown red tan soapstone	141	185
brown black crumbly rock	185	198
brown tan soapstone combination	198	216
tan colored soapstone	216	238
red grn brwn yllw combo silts/soapstone	238	265
brown tan combination soapstone	265	286
brown grey black soapstone	286	305
light brown pumice	305	335
blue clay	335	361
green pumice grey combination	361	401
black silts grey white pumice	401	425
		-
		1

(unbonded) Water Well Constructor Certification

Date Started4/10/2018

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.

Completed 4/11/2018

are con or my knowledge and center.		
License Number	Date	1 0 0010
		AUG 1 6 2018
Signed		

bonded) Wate	er Well Constructo	r Certification
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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 1899		Date 4/26/2018	
Signed	SAM KINGREY (E-filed)	T 13008	
Contact	Info (optional)		

WELL I.D. LABEL# L 130027 STATE OF OREGON HARN 52718 START CARD # 1038249 WATER SUPPLY WELL REPORT 5/2/2018 **ORIGINAL LOG#** (as required by ORS 537.765 & OAR 690-205-0210) (1) LAND OWNER Owner Well I.D. Last Name SINGHOSE First Name PHILLIP (9) LOCATION OF WELL (legal description) Company_ County HARNEY Twp 24.00 S N/S Range 27.00 E E/W WM Address POBOX 55 Sec 10 NW 1/4 of the SE 1/4 Tax Lot 406 City RILEY State OR Zip 97758 Tax Map Number New Well Deepening (2) TYPE OF WORK " or 43.50174500 DMS or DD Alteration (complete 2a & 10) Abandonment(complete 5a) " or -119.46493000 DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address APPROX 4 MILES EAST OF RILEY OREGON Casing: Material From Amt sacks/lbs Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD SWL(psi) SWL(ft) Rotary Air Rotary Mud Cable Auger Cable Mud Existing Well / Pre-Alteration Reverse Rotary Other Completed Well 4/9/2018 Flowing Artesian? (4) PROPOSED USE Domestic X Irrigation Community Industrial/ Commercial Livestock Dewatering Depth water was first found 119.00 WATER BEARING ZONES Thermal Injection Other SWL Date Est Flow SWL(psi) + SWL(ft) From To (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 4/9/2018 119 410 1000 Depth of Completed Well 430.00 **BORE HOLE** SEAL sacks Dia Material From From Amt lbs 20 57 57 71 Bentonite Calculated 57.55 16 57 430 (11) WELL LOG Calculated Ground Elevation Method A \Box D How was seal placed: From To X Other POURED & TAGGED brown sandy clay Backfill placed from _____ ft. to ____ ft. Material_ brown sand & gravel 2 6 17 light brown sandy clay 6 __ ft. to ft. Material Size Filter pack from 17 38 light brown strips of sandstone Explosives used: Yes Type___ Amount 38 41 black fractured basalt (5a) ABANDONMENT USING UNHYDRATED BENTONITE 41 black solid basalt 98 119 98 Proposed Amount Actual Amount black basalt w/some fractures 119 149 combo blk rd ylw grn silty spstn claypum (6) CASING/LINER 149 176 combo red ylw grn gry fine silt Dia Casing Liner + From Gauge Stl Plstc Wld Thrd 176 216 combo brwn yllw grn silty pumice × 6 .250 combo brwm gry lt brwn silty pumice 216 278 310 combo drk/lt brwn black silty clays 310 410 brown/black fine silty clay 410 430 brown clay Inside Outside Other Location of shoe(s) Temp casing Yes Dia 20 From + 0 (7) PERFORATIONS/SCREENS Perforations Method Screens Type _ Date Started4/2/2018 Completed 4/9/2018 Perf/ Casing/ Screen Tele/ Scrn/slot Slot # of (unbonded) Water Well Constructor Certification Screen Liner 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. AUG 1 6 2018 License Number 1896 (8) WELL TESTS: Minimum testing time is 1 hour TONY HACKETT (E-filed) Bailer O Flowing Artesian O Pump Air (bonded) Water Well Constructor Certification Drill stem/Pump depth Duration (hr) Yield gal/min Drawdown

ORIGINAL - WATER RESOURCES DEPARTMENT

°F Lab analysis Yes By_

Water quality concerns? Yes (describe below) TDS amount 291

Temperature 55

ppm

License Number 1899

Contact Info (optional) _

Signed SAM KINGREY (E-filed)

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.