STATE OF OREGON	BALKE 59952
WATER SUPPLY WELL REPORT	WELL LABEL # L 97417
(as required by ORS 537.765 & OAR 690-205-0210)	START CARD # 19 975 9
(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)
First Name John Last Name Inmon	County Bather Twp 75 N/S Range 995 E/W W
Company	Sec 10 NW 1/4 of the GE 1/4 Tax Lot 1800
Address Si SAN Reduce ST City Surling State Con Zip 98901	Tax Map Number Lot
	LatOMS or DI LongUMS or DI
(2) TYPE OF WORK X New Well Deepening Conversion	Street address of well ( Nearest address
(3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(R)
(4) PROPOSED USE Domestic Irrigation Community Industrial/Commericial Livestock Dewatering Thermal Injection Other	Existing Well / Predeepening Completed Well Flowing Artesian? Dry Hole?
(5) BORE HOLE CONSTRUCTION Special Standard [Attach copy]	WATER BEARING ZONES Depth water was first found <u>200</u>
Depth of Completed Well _ <b>L</b> O() fl.	$\begin{array}{c c c c c c c c c c c c c c c c c c c $
BORE HOLE SEAL sacks/	
Dia From To Material From To Amt lbs	
18 0 22 Creant 0 21 18 52 12" 22 160 Creant 0 160 90 101	
10 138 506	
ow was seal placed: Method A B XC D E	Ground Elevation
ow was seal placed: Method A B ZC D E	Material From To
ackfill placed from fl. to ft. Material	Brown Chay & Gravel 4 28
ilter pack from fl. to fl. Material Size	izvoun chiny 28 loy
xplosives used: Yes Type Amount	they d small stort 104 16
6) CASING/LINER	Granite 160 600
Casing Liner Dia + From . To Gauge Stl Plstc Wld Thrd	
2 - +2222222 -	
	RECEIVED RECEIVED
	APR 2 0 2009 FEB 0 2 2009
Shoe Inside Other Location of shoe(s)	
Temp casing Yes Dia 16 From D To 22	WAICH RESOURCES DE WATER RESOURCES DEPT
7) PERFORATIONS/SCREENS	SALEM, OREGON SALEM, OREGON
Perforations Method	
Screens Type Material	
erf/S Casing/ Screen Scrn/slot Slot # of Tele/	Date Started 10-26-08 Completed 12-12-08
een Liner Dia From To width length slots pipe size	
	(unbonded) Water Well Constructor Certification I certify that the work I performed on the construction, deepening, alteration, c
NONE	abandonment of this well is in compliance with Oregon water supply we
	construction standards. Materials used and information reported above are true to the best of my knowledge and ballef
	the best of my knowledge and belief. License Number 1690 Date 1-10-09
b) WELL TESTS: Minimum testing time is 1 hour	Password (1) filing elegennically)
Pump Bailer Air Flowing Artesian   Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed Julio Alexandre III
150 Sta 4-m	(bonded) Weler Weil Configurator Certification
	I accept responsibility for the construction, deepening, alteration, or abandonme
	work performed on this well during the construction dates reported above. All wo
Imperature 54°F Lab analysis Yes By /ater quality concerns? Yes (describe below)	performed during this time is in compliance with Oregon water supply we construction standards. This report is true to the best of my knowledge and belief.
/ater quality concerns? Yes (describe below)	License Number 415 Date 10-09
	Password : (if filing electronically)
JAN 1 4 2009	Signed Contact Info (optional)

T 10850

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WATER SUPPLY WELL RI (as required by ORS 537.765 & (				LLL LABEL # L		
(1) LAND OWNER	Owner Well I.D.		(9) LOCATION O			
First Name John Company		f.N	County Baker T Sec 10 NA	wp 75 N/S	Range 🌹	26 E/W
	State CA Zip 9	a a x T	Tax Map Number	" or	Lot	
(2) TYPE OF WORK		Conversion	Lat	" or		DMS or DMS or
Alteration (repair/recondition)		CONVENSION	Street addre	ss of well ( Neare	st address	
(3) DRILL METHOD	······································		48 863	Hwy 30	HAINES	<b></b>
	Cable Auger Cable M	lud	(10) STATIC WAT		SWL(psi) +	SWL(A)
(4) PROPOSED USE	mestic Irrigation Commu	nity	Existing Well / Prede	cepening		1
Industrial/ Commericial 🔀 Liv			Completed Well 9. 6-08 33 33 Flowing Artesian? Dry Hole?			
	ner		WATER BEARING ZON		was first found	
5) BORE HOLE CONSTI Depth of Completed Well _5		Attach copy			ow_SWL(psi)	+ SWL(n)
BORE HOLE	SEAL	sacks		3 320 8	0 83	· 33
Dia From To	Material From To	Amt los				
2	Worte 0 17	5				
6 22 520			(11) WELL LOG	Ground Elevation		
low was seal placed: Method		E	Material		From	To
	Batevite		TOP Soils Browsky Chron		0	2
ackfill placed from ft. to	ft. Material	ize	Brown CLA	4 4 Gravel	11	16
xplosives used: Yes Type	Amount		Grante S	y	93	93
6) CASING/LINER				& Grovel	100	130
Casing Liner Dia + 1	rom To Gauge Stl Pis	tc Wld Thrd	Grante		130	345
	8 137 .2080		Brown Sha	Le	370	280
			BLACK BATSA	LT Crochund	380	
8-8			SAND Stor	e.	470	475
Shoe Inside Outside	Other Location of shoe(s)	127'6"	Grante		476	520
Temp casing Yes Dia		20	·	·····		
7) PERFORATIONS/SCR			· · · · · · · · · · · · · · · · · · ·			
Perforations M Screens Ty						
erf/S Casing/ Screen		of Tele/				
een Liner Dia From		ots pipe size		Complet		-08
	DNE		(unbonded) Water Well 1 certify that the work 1			ng alteration
- M			abandonment of this w	ell is in compliance w	vith Oregon wa	iter supply
			construction standards. It the best of my knowledge		nation reported	above are tru
B) WELL TESTS: Minimum	n testing time is 1 hour		License Number	<b>40</b> Date	9102	08
Pump 🔵 Bailer	• • •	g Artesian	Password of fing elect	onically		
Yield gal/min Drawdown	Drill stem/Pump depth Duration		(bonded) Verer Well Co	and the contraction		
			l accept responsibility for		ening, alteration	, or abandon
emperature <b>58</b> °F Lab analy	ysis Yes By		work performed on this w performed during this ti			
	(describe below)		construction standards. T		est of my knowle	dge and beli
Erom To	Description Amou	nt Units	License Number 41		218	-08
RECEIVED	RECEIVE		Password : (if filing electr Signed	Ntotto		
		<u> </u>	Contact Info (optional)			
APR 20 2009 IIS REPORT MUST BE SUBMIT	ORIGINAL WOTER	RAPURCES D ES DEPARTM	EPARTMENT ENT WITHIN 30 DAYS O	F COMPLETION OF W	ORK	
WATER RESOURCES D			T 1085	5.6	Form Ve	rsion: 0.89

## **BAKE 51952**

## **BAKE 51952**

WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-20:	5-0210)		WELL LABEL # L 97467		
		START CARD # 19	9769		
(-,	er Well I.D.	- (9) LOCATION OF WELL (legal descri	ption)		
First Name Tohn Last 1	Name Inmon		lange <b>995</b>		
		Sec 10 1/4 of the 6 1/4	Tax Lot 18		
Address 51 SAN Redvo St City Surfin Address State	0 - 7 - A - A - 1	Tax Map Number	Lot		
	Ca Zip 98901	Lat " or	Di		
(2) TYPE OF WORK Xew Well	Deepening Conversion	Long " or " or C Street address of well (Nearest a	Di		
Alteration (repair/recondition)					
(3) DRILL METHOD Rolary Air Rolary Mud Cable	Auger Cable Mud	48 363 Hwy 30 HA	Nes or 9		
Reverse Rolary Other		(10) STATIC WATER LEVEL	VL(psi) + SW		
(4) PROPOSED USE Domestic		Existing Well / Predeepening	VL(psi) + SW		
Industrial/ Commercial Livestock		Completed Well 2 - 12 df			
Thermal Injection Other			Hole?		
(5) BORE HOLE CONSTRUCTION	Special Standard TAusch co	WATER BEARING ZONES Depth water was by) SWL Date From To Est Flow	and the second se		
Depth of Completed Well 600 ft.	······································	12-12-04 /SP	SWL(psi) + SI		
BORE HOLE	SEAL sach	8/			
Dia From To Material	From To Amt Iba		┟╌╌──┥╞═┥╌╴		
12" 22 110 Commt	0 160 90.10				
8' 604 600		(11) WELL LOG Ground Elevation			
How was seal placed: Method A		Material	From T		
Other	and Maria based in a	Too boil	04		
Backfill placed from ft. to ft	t. Material	Brown Chay & Gravel	4 28		
Filter pack from ft. Mai		- they a spart that	28 104		
Explosives used: Yes Type	Amount	Corpolite Story	104 100		
(6) CASING/LINER		<u> </u>			
Casing Liner Dia + From To					
	6 1257 00 0 X 2 1250 00 0 X				
		· · · · · · · · · · · · · · · · · · ·			
Shoe Inside Outside Other Temp casing Yes Dia	Location of shoe(s)				
(7) PERFORATIONS/SCREENS	n 0 To 22				
Perforations Method	NONE				
Screens Type	Material	· · · · · · · · · · · · · · · · · · ·			
Perf/S Casing/Screen Sc	rn/slot Slot #of Tele/	Date Started	10 10 - 01		
creen Liner Dia From To w	vidth length slots pipe size		12-12-01		
		. (unbonded) Water Well Constructor Certification   certify that the work I performed on the construction	on deepenion alter		
NONE		abandonment of this well is in compliance with	Oregon water sup		
		construction standards. Materials used and information	on reported above a		
8) WELL TESTS: Minimum testing tin	na le 1 hour	the best of my knowledge and belief. License Number	1-10-09		
· · · ·	•	Password (I Ging elegionicality)	1-10-01		
Pump OBailer OAir Yield gal/min Drawdown Drill stem/P	<b>U</b> •	Signed III And III			
	80 4-10	(bunded) Weer Wen Corrigactor Certification			
		I accept responsibility for the construction, deepening			
Temperature 54°F Lab analysis Yes	Rv	work performed on this well during the construction da performed during this time is in compliance with			
Water quality concerns? Yes (describe belo		construction standards. This report is true to the best of	my knowledge and		
Erom To Description		License Number 415 Date A	10-09		
	JAN 1 4 20	Password : (if filing electronically)			

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOLUCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK SALEM, OREGON