

WELL LABEL # L 94002

START CARD # 1006751

(1) LAND OWNER Owner Well I.D. _____

First Name Tim Last Name Clemens
 Company _____
 Address 235 Hwy 20 N
 City Hines State OR Zip 97738

(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 250.00 ft.

BORE HOLE			SEAL		Amt	sacks/ lbs
Dia	From	To	Material	To		
20	0	20	Bentonite	0	56	S
16	20	190				
12	190	250				

How was seal placed: Method A B C D E

Other poured and packed

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"/>	14		1	19	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	12		2	178	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method factory cut

Screens Type _____ Material _____

Perf/S	Casing/Screen	Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/pipe size
Perf	Casing	12	78	178	25	3	2,200		

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
400	138	160	8

Temperature 57 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Harney Twp 25.00 S N/S Range 31.00 E E/W WM
 Sec 10 SE 1/4 of the SW 1/4 Tax Lot 1900
 Tax Map Number 4-2 Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address

Dog Mountain Lae off Hwy 205, 12 miles south of Burns

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	<u>05-19-2009</u>		<u>22</u>

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 24

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
<u>05-14-2009</u>	<u>24</u>	<u>219</u>	<u>400</u>		<u>22</u>

(11) WELL LOG Ground Elevation _____

Material	From	To
Top Soil	0	2
Brown Clay	2	24
Gray Clay	24	76
Gray Clay/Fine Sand	76	184
Green Clay	184	219
Hard Brown Clay	219	250

Date Started 05-13-2009 Completed 05-19-2009

(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.

License Number _____ Date _____

Electronically Filed

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.

License Number 1675 Date 05-28-2009

Electronically Filed

Signed GEORGE VALENTINE (E-filed)

Contact Info (optional) George Valentine

HARN 51588

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

06-19-2009

WELL LABEL # L 94026

START CARD # 1006752

(1) LAND OWNER Owner Well I.D.
First Name Tim Last Name Clemens
Company
Address 235 Hwy 20 N
City Hines State OR Zip 97738

(2) TYPE OF WORK [X] New Well [] Deepening [] Conversion
[] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD
[] Rotary Air [] Rotary Mud [X] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE [] Domestic [X] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well 135.00 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, sacks/lbs. Includes data for Bentonite Chips.

How was seal placed: Method [] A [] B [] C [] D [] E

[X] Other Poured and Packed

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(6) CASING/LINER table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes data for 16 and 14 inch diameters.

Shoe [] Inside [] Outside [] Other Location of shoe(s)

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Factory Perforated

Screens Type Material

Table with columns: Perf/S creen, Casing/ Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Includes data for 14 inch casing.

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

[X] Pump [] Bailer [] Air [] Flowing Artesian

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Table with 4 columns: Yield, Drawdown, Drill stem/Pump depth, Duration. Includes data for 850 gal/min yield.

Temperature 59 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below)

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County Harney Twp 25.00 S N/S Range 31.00 E E/W WM
Sec 9 NE 1/4 of the SW 1/4 Tax Lot 1400
Tax Map Number Lot
Lat " " or DMS or DD
Long " " or DMS or DD
[] Street address of well [] Nearest address

Dog Mountain Lane off Hwy 205, 12 miles south of Burns

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Predeepening, Date, SWL(psi), SWL(ft). Includes data for 06-12-2009.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 25

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Includes data for 06-12-2009.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Includes data for Top Soil, Sandstone, Brown Clay, Blue Clay, etc.

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JUN 22 2009

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 06-02-2009 Completed 06-12-2009

(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.

License Number Date

Electronically Filed

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.

License Number 1675 Date 06-19-2009

Electronically Filed

Signed GEORGE VALENTINE (E-filed)

Contact Info (optional) George Valentine, 541-493-7065

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK