

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

01-25-2007

WELL LABEL # L 88286

START CARD # 1000466

(1) LAND OWNER Owner Well I.D. 1377

First Name _____ Last Name _____
Company GUTIERREZ CATTLE RANCH #1
Address HC 68 BOX 3310
City POST State OR Zip 97752

(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 390.00 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
20	0	18.5	Bentonite	0	18.5	22	S
14	18.5	360					
8	360	390					

How was seal placed: Method A B C D E

Other Poured in Dry

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	Pstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	16	<input checked="" type="checkbox"/>	1.5	18.5	.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"/>	<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"/>	<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 _____

Screens Type _____ Material _____

Perf/ Casing/ Screen Screen Liner Dia From To Scrn/slot width length # of slots Tel/ pipe size

Perf/	Casing/	Screen	Screen	Liner	Dia	From	To	Scrn/slot	width	length	# of	Tel/

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

Pump Bailor Air Flowing Artesian

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

1,800		390	1

Temperature 56 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

From _____ To _____ Description _____ Amount _____ Units _____

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Crook Twp 16.00 S N/S Range 22.00 E E/W WM

Sec 35 SE 1/4 of the NE 1/4 Tax Lot 1200-300

Tax Map Number _____ Lot _____

Lat _____ ° 0' _____ " or _____ DMS or DD

Long _____ ° 0' _____ " or _____ DMS or DD

Street address of well Nearest address

PAULINA HWY, POST/PAULINA OREGON

(10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)

Existing Well / Prodeopenig			
Completed Well	01-23-2007		120

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 120

SWL Date From To Est Flow SWL(psi) + SWL(ft)

01-23-2007	260	390	1,800		120

(11) WELL LOG

Ground Elevation

Material	From	To
SANDY TOP SOIL	0	1
LIGHT BROWN SANDSTONE	1	36
DARK BROWN SANDSTONE	36	53
LIGHT BROWN SANDSTONE	53	102
DARK GREY BASALT	102	236
DARK BROWN SANDSTONE	236	250
GREY BASALT W/ BROWN SEEMS	250	390

RECEIVED

JUL 25 2007

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 01-12-2007

Completed 01-23-2007

(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 584 Date 01-25-2007

Electronically Filed

Signed DARRELL MAPHET (E-filed)

Contact Info (optional) _____