

STATE OF OREGON
WATER SUPPLY WELL REPORT
 (as required by ORS 537.765)

WELL I.D. # L 68673
 START CARD # 162424

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number _____

Name Brad Allen
 Address 44821 Pacahontas Rd
 City Haines State OR Zip 97833

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 428 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
8"	205'	428'	N/A			

How was seal placed: Method A B C D E
 Other N/A
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8"	205'	428'	200	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	NONE			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) Ring Bit IR

(7) PERFORATIONS/SCREENS:

Perforations Method FIV Knife
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
205'	425'	1/2"	11000	8"		<input checked="" type="checkbox"/>	<input type="checkbox"/>
Perf 20' Skipped 20'							

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

Yield gal/min	Drawdown	Drill stem at	Time
1200		220	1 hr.

Temperature of water 54° water was 54° at start Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County Baker Latitude _____ Longitude _____
 Township 9S N or S Range 39E E or W. WM.
 Section 8 NW 1/4 NW 1/4
 Tax Lot 3100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Pacahontas Rd
Haines OR

(10) STATIC WATER LEVEL: 30' AT START
30 ft. below land surface. Finish Date 4-22-04
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 220

From	To	Estimated Flow Rate	SWL
220	290	1200 gpm	30

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Sand & Gravels	234	250	30'
Sandy Clay Gravels	250	270	30'
Sand & Gravel	270	330	30'
Sandy Clay & Gravels	330	360	30'
Sand & Gravel	360	390	30'
Sandy Clay Gravel	390	415	30'
Sand & Gravel	415	425	30'
Sandy Brown Clay	425	428	30'

RECEIVED

APR 28 2004

WATER RESOURCES DEPT
SALEM, OREGON

Date started 4-19-04 Completed 4-22-04

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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.

Signed Michael J. [Signature] WWC Number 1737
 Date 4-24-04

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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.

Signed Robert [Signature] WWC Number 415
 Date 4-24-04