

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

(1) LAND OWNER BIRD ALLEN Well Number _____
Name BIRD ALLEN
Address 44821 PACHA HUNTERS RD
City HAINES State OR Zip 97833

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

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

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 525 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
10"	0	106	CEMENT	10	106	40 SACKS
12"	106	525	PORTLAND CEMENT	0	10	9 SACKS

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

(6) CASING/LINER

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	12"	12	106	.375"	<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) 106' 8" 12"

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
			NONE			<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
2000		520	3 hrs

Temperature of water 58° 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 (legal description)
County BAKER
Tax Lot 2500 Lot _____
Township 7S N or S Range 39E E or W WM
Section 14 SW/4 NE 1/4
Lat _____ ° ' " or _____ (degrees or decimal)
Long _____ ° ' " or _____ (degrees or decimal)

Street Address of Well (or nearest address) CONROE LANE
HAINES OR

(10) STATIC WATER LEVEL
11 ft. below land surface. Date 3-25-05
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 160

From	To	Estimated Flow Rate	SWL
160	525	2000	11

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Top Soil	0	3	
Tan clay	3	22	
Green soft clay	22	37	
Blue soft clay	37	65	
Tan sticky clay	65	95	
Black Basalt	95	160	
Fractured black basalt	160	480	
Brown shale	480	525	11'

Date Started 2-12-05 Completed 2-25-05

(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.

WWC Number 1737 Date 2-21-05
Signed Michael J. Johnson

(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.

WWC Number 415 Date 2-21-05
Signed Robert W. Stoff