

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

05-26-2006

WELL LABEL # L 78294

START CARD # 175654

(1) LAND OWNER

Owner Well I.D. _____

First Name _____ Last Name _____
Company COUNTY OF BAKER, PARKS AND RECREATION DEPARTMENT
Address 1995 THIRD ST
City BAKER CITY State OR Zip 97814

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

(3) DRILL METHOD

[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

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

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)

Depth of Completed Well 263.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, sacks/lbs. Rows include Bentonite Chips and Cement.

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

[X] Other POURED DRY

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 rows for 10" and 8" diameters.

Shoe [] Inside [X] Outside [] Other Location of shoe(s) 195

Temp casing [X] Yes Dia 14 From 0 To 42

(7) PERFORATIONS/SCREENS

Perforations Method TORCH

Screens Type _____ Material _____

Table with columns: Perf/ Screen, Casing/ Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size.

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

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

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

Table with 4 columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 350, 260, 1.5.

Temperature 63 °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 Baker Twp 9.00 S N/S Range 46.00 E E/W WM

Sec 30 NE 1/4 of the NW 1/4 Tax Lot 3903

Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD

Long _____ " or _____ DMS or DD

[] Street address of well [] Nearest address

1080 FEET S AND 2283 FEET E FROM NW CORNER OF SECTION 30

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Rows for Existing Well / Predeepening and Completed Well (05-16-2006, 60).

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 31

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Rows for 05-03-2006, 05-05-2006, 05-08-2006.

(11) WELL LOG

Ground Elevation _____

Table with columns: Material, From, To. Lists soil layers like SOIL, BROWN CLAY, GRAVEL, COBBLES, etc.

Date Started 05-03-2006 Completed 05-16-2006

(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.

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.

License Number 1775 Date 05-26-2006

Electronically Filed

Signed JASON ACQUISTAPACE (E-filed)

Contact Info (optional)