

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

WELL I.D. # L 91026  
~~89344~~  
START CARD # 188448

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

(1) LAND OWNER Brent Keyes Well Number \_\_\_\_\_  
Name Brent Keyes  
Address 45298 Beachwood 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 383 ft.  
Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
	<u>N/A</u>		<u>IN PLACE</u>			
<u>6</u>	<u>195</u>	<u>383</u>				

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_

Backfill placed from N/A ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>6"</u>	<u>195</u>	<u>383</u>	<u>.200</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) Ring AT 383

(7) PERFORATIONS/SCREENS

Perforations Method TOUCH  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>210</u>	<u>383</u>	<u>5/16</u>	<u>700</u>	<u>6"</u>	<u>6"</u>	<input checked="" 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
<u>400+</u>		<u>880</u>	<u>1hr</u>

Temperature of water 53° 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 2400 Lot \_\_\_\_\_  
Township 8S N or S Range 38 E E or W WM  
Section 7 SE 1/4 SW 1/4

Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) 45298 Beachwood Rd Haines OR

(10) STATIC WATER LEVEL  
44 ft. below land surface. Date 6-1-07  
44 ft. below land surface. Date 6-1-07  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES

Depth at which water was first found 195

From	To	Estimated Flow Rate	SWL
<u>195</u>	<u>383</u>	<u>200</u>	<u>44</u>

(12) WELL LOG

Material	From	To	SWL
<u>Small layers of Clay &amp; Gravel's</u>			
<u>SANDY</u>	<u>195</u>	<u>383</u>	<u>44</u>

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APR 05 2012 JUN 11 2007  
WATER RESOURCES DEPT SALEM, OREGON WATER RESOURCES DEPT SALEM, OREGON

Date Started 5-31-07 Completed 6-1-07

(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 173.7 Date 6-8-07  
Signed Will At...

(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 6-8-07  
Signed Robert R. Steff

# BAKE 51755

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

WELL I.D. # L 88324  
 START CARD # 188428

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

(1) LAND OWNER Brent Kerns Well Number \_\_\_\_\_  
 Name Brent Kerns  
 Address 45298 Pocahontas 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 383 ft.  
 Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
	<u>N/A</u>		<u>IN PLACE</u>			
<u>6</u>	<u>195</u>	<u>383</u>				

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

(6) CASING/LINER

Casing:	Diameter	From	To	Gauge	SEAL			
					Steel	Plastic	Welded	Threaded
	<u>6"</u>	<u>195</u>	<u>383</u>	<u>.200</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<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 383

(7) PERFORATIONS/SCREENS

Perforations Method torch  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>210</u>	<u>393</u>	<u>5x6</u>	<u>700</u>	<u>6"</u>	<u>2"</u>	<input checked="" 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
<u>400+</u>		<u>380</u>	<u>1-hr</u>

Temperature of water 52° 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 2400 Lot \_\_\_\_\_  
 Township 8S N or S Range 38 E E or W WM  
 Section 7 SE 1/4 SW 1/4

Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
 Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) 45298 Pocahontas Rd Haines OR

(10) STATIC WATER LEVEL  
44 ft. below land surface. Date 6-1-07  
44 ft. below land surface. Date 6-1-07  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES

Depth at which water was first found 195

From	To	Estimated Flow Rate	SWL.
<u>195</u>	<u>383</u>	<u>200</u>	<u>44</u>

(12) WELL LOG

Material	Ground Elevation		SWL
	From	To	
<u>SMALL layers of</u>			
<u>Clay &amp; Gravel</u>			
<u>SANDY</u>	<u>195</u>	<u>383</u>	<u>44</u>

**RECEIVED**  
 JUN 11 2007  
 WATER RESOURCES DEPT  
 SALEM, OREGON

Date Started 5-31-07 Completed 6-1-07

(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 6-8-07  
 Signed [Signature]

(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 6-8-07  
 Signed Robert R. Steffel