

BAKE 51756

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

WELL I.D. # L 91028
 START CARD # 191257

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

(1) LAND OWNER Well Number _____
 Name Jason Williams
 Address 48857 Hwy 30
 City North Powder State OR Zip 97867

(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 401 ft.
 Explosives used: Yes No Type _____ Amount _____

BORE HOLE		SEAL	
Diameter	From To	Material	From To
10"	0 220	Side Drilled	Seal 6" 17"
8"	230 401	FILLED ON TO 5" CONCRETE 55MFT	

How was seal placed: Method A B C D E
 Other _____
 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"	220	401	252	<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) 8" 401 Ring Bit

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

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
201	401	7x4	800	8"	8"	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
500*		395	2 hrs

Temperature of water 62° 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 300 Lot _____
 Township 7S N or S Range 99E E or W WM
 Section 3 NW 1/4 NE 1/4

Lat _____ " or _____ (degrees or decimal)
 Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) 4 8857 Hwy 30
North Powder

(10) STATIC WATER LEVEL
Below 60 ft. below land surface. Date 6-7-07
After 60 ft. below land surface. Date 6-7-07
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
 Depth at which water was first found 230

From	To	Estimated Flow Rate	SWL
230	401	4 to 500	60

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Brown Clay & Gravel	220	330	
Soft Brown Rocks	330	401	60
(Decomposed Granite)			

RECEIVED

JUN 11 2007

WATER RESOURCES DEPT
 SALEM OREGON

Date Started 6-5-07 Completed 6-7-07

(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 [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 [Signature]