STATE OF OREGON WATER SUPPLY WELL REPORT

BBKK552075

WELL LABEL # L <u>/03024</u> WATER SUPPLY WELL REPORT (ORS 537.765 & OAR 690-205-0210) START CARD # <u>206274</u> Instructions for completing this report are on the last page of this form. **ORIGINAL LOG#** Owner Well I.D. (1) LANDOWNER (9) LOCATION OF WELL (legal description) First Name _ Elmer County Baker Twp 6 N or Range 39 Oor W W.M. ompany
Address P.A. Box 226
City North Powder State OR. Tax Map Number 5 € (2) TYPE OF WORK New Conversion Deepening DMS or DD ☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a) Street Address of Well (or nearest address) 50443 Bidwell Rd. (2a) PRE-ALTERATION: Well Depth North Powder OR 97867 Seal Material Other ☐ Steel ☐ Plastic Casing Type: (10) STATIC WATER LEVEL Casing Diameter Casing Gauge SWL(psi) | + | SWL (ft) Date Existing Well/Pre-Alteration (3) DRILL METHOD Rotary Air Rotary Mud Auger Completed Well Flowing Artesian? Yes Dry Hole? Yes ☐ Cable ☐ Cable Mud ☐ Reverse Rotary ☐ Other WATER BEARING ZONES Depth water was first found 5 □ Community (4) PROPOSED USE □ Domestic Irrigation Livestock Dewatering Injection Est Flow | SWL (psi) ☐ Industrial/Commercial SWL Date From Other 10-8-10 Thermal 10-11-10 (5) BORE HOLE CONSTRUCTION Depth of Completed Well ______ft. Special Standard: \(\square\) Yes (attach copy) BORE HOLE Dia Material From To Amount SER /lbs From (11) WELL LOG Ground Elevation Bent 14 110 10 Material From To 5 How was seal placed: Method A B C D E 70 Other 3/5" poured Backfill placed from ilter pack from ft. to ft. Material 140 (5a) ABANDONMENT USING UNHYDRATED BENTONITE: Calculated Amount Proposed to be Used: ___ Actual Amount Used: IAN U 3 Z (6) CASING/LINER WATER RESOURCES DEP Gauge | Steel | Plastic | Welded | Thrd To Csng Linr | Dia | + | From | 138 .250 SALEM, OREGON ID. 10-8-10 Completed 10-12-10 Date Started (unbonded) Water Well Constructor Certification Shoe Inside Outside Other Location of shoe(s) 138 l certify that the work I performed on the construction, deepening, alteration, or From_ abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to (7) PERFORATIONS/SCREENS the best of my knowledge and belief. Method __ Perforations License Number ____ Screens _ Material Type_ Tele/ Screen/ Signed # of Screen slot Slot pipe Perf Scrn Csng Linr Dia From To width length slots (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. (8) WELL TESTS: Minimum testing time is 1 hour Date 10 - 26 - 10 Air Air ☐ Flowing Artesian License Number 1816 ☐ Pump ☐ Bailer Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 30C 140 140 remperature 52 °F Lab analysis 🗌 Yes By Water quality concerns? Yes (describe below) TDS ppm 541-519-06/8 NOV 1 2 2010 From Description Amount Units

WATER RESOURCES DEP

STATE OF OREGON WATER SUPPLY WELL REPORT

BAKE 52075

(ORS 537.765 & OAR 690-205-0210)

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Instructions for completing	this report are on the last page of this form.
(OKS 337.703 & OAK 090-20	03-0210)

WELL LABEL # L <u>/03 02 4</u> START CARD # <u>2062 7 4</u> ORIGINAL LOG #

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(2a) PRE-A	ALTER	ATION	<u></u>		Well De	pth		ft.	Street Address	of Well (or	nearest ad	dress) 50	143 Bia	Inell Rd.
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		7 Stool			1 Other									
Casing Typ		Steel							(10) STATIC	WATE	R LEVEL			
Casing Gaug	ge		Ca	sing Diam	eter							Date	SWL(psi)	+ SWL (ft)
									Existing Well/	Pre-Altera	tion •		1	
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