Corrected 10/28/2025

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

Original Well Report

WELL LABEL # L	Bake	50775	
START CARD #	199995		_

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)		
First Name Kenneth Last Name Casper	County BAKER Twp 12 S N/S Range 39 E E/W WM		
Company	Sec 27 SE 1/4 of the NE 1/4 Tax Lot 100		
Address 812 7th St. South	Tax Map Number Lot		
City Nampa State ID Zip 83651	Tax Map Number Lot Lat "or 44.495983" DMS or DD		
(2) TYPE OF WORK New Well Deepening Conversion	Long or -117.91583 117.91254 DMS or DD		
Alteration (repair/recondition) X Abandonment	Street address of well Nearest address		
Abandonment Abandonment			
(3) DRILL METHOD Rotary Air	(10) STATIC WATER LEVEL		
Reverse Rotary Other	Date SWL(psi) + SWL(ft)		
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening Completed Well		
Industrial/ Commercial Livestock Dewatering	Flowing Artesian? Dry Hole?		
Thermal Injection Other			
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	WATER BEARING ZONES Depth water was first found		
Depth of Completed Well ft.	SWL Date From To Est Flow SWL(psi) + SWL(ft)		
BORE HOLE SEAL sacks/			
Dia From To Material From To Amt lbs			
7.75 0 80 Cement 40 295 73 S			
6 80 295 Bentonite Chips 0 40 18 S			
	(11) WELL LOG Ground Elevation		
	Ground Elevation		
How was seal placed: Method A B C D E	Material From To		
Other Pour dry	We opened well to 3' below ground level and found casing to be sub-standard - would not receive		
Backfill placed fromft. toft. Material Filter pack fromft. toft. Material	perforator. Obtained Special Standards - received		
	9/28/11. Pressure grouted to surface with neat		
Explosives used: Yes Type Amount	cement. Returned the following day. Cement had		
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	fallen to 40'. As per Bob Maynard, filled remaining		
	area to surface with Bentonite as grouting machine		
● ○ 7.75 ☐ 1 80 .177 ● ○ X	equipment had been removed.		
	Original Well Report - Bake 50775		
	- CUCD		
	RECEIVED		
	N NO.		
Shoe Inside Outside Other Location of shoe(s)			
Temp casing Yes Dia From To			
(7) PERFORATIONS/SCREENS	WATEH RESCURCES DEPT		
Perforations Method	SALEM, OREGON		
Screens Type Material	SAUCINI, OTILIS		
Perf/S Casing/ Screen Scrn/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	Date Started 09-20-2011 Completed 09-26-2011		
	(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.		
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date		
	Password : (if filing electronically)		
Pump Bailer Air Flowing Artesian	Signed		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(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		
Temperature °F Lab analysis Yes By	performed during this time is in compliance with Oregon water supply well		
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.		
From To Description Amount Units	License Number 1714 Date 10-13-2011		
	Password fif fiting electronically		
	Password of filing electronically Signed Dava Cafanson		
	Contact Info (optional)		