

STATE OF OREGON
WATER SUPPLY WELL REPORT
(ORS 537.765 & OAR 690-205-0210)

BAKE 52264

JUL 09 2013

WELL LABEL # L 109663
START CARD # 209069
ORIGINAL LOG #

take
5226

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

(1) LANDOWNER Owner Well I.D. SALEM, OR
First Name Bert Last Name Siddoway
Company BK King Ranches Inc.
Address P.O. Box 115
City Dunkee State OR Zip 97905

(9) LOCATION OF WELL (legal description)
County Baker Twp 11 N or S Range 43 E or W W.M.
Sec 19 SE 1/4 of the NE 1/4 Tax Lot 2600
Tax Map Number Lot
Lat or DMS or DD
Long or DMS or DD

(2) TYPE OF WORK New Conversion Deepening
 Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth _____ ft.
Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

Street Address of Well (or nearest address) - 5 miles west on
Burnt R. Canyon Rd.

(3) DRILL METHOD Rotary Air Rotary Mud Auger
 Cable Cable Mud Reverse Rotary Other _____

(10) STATIC WATER LEVEL
Date SWL (psi) SWL (ft)
Existing Well/Pre-Alteration
Completed Well 4-4-13 8
Flowing Artesian? Yes Dry Hole? Yes

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

WATER BEARING ZONES Depth water was first found 11
SWL Date From To Est Flow SWL (psi) SWL (ft)
3-19-13 11 12 4 11
3-21-13 60 200 200 8
3-27-13 200 400 300 5
4-4-13 400 600 200 5

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 600 ft. Special Standard: Yes (attach copy)

BORE HOLE SEAL

Dia	From	To	Material	From	To	Amount	SCS/lbs
14	0	26	Bent	0	26		41
12	26	600					

How was seal placed: Method A B C D E
 Other primed dry
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____

(11) WELL LOG Ground Elevation _____

Material	From	To
Top Soil	0	2
Brown Clay	2	11
Soft Blue Clay Sand	11	12
Blue Clay	12	18
Hard Blue Clay	18	600
Hard Blue Clay w/ sandstone	600	600

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

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SALEM, OR
Date Started 3-19-13 Completed 4-4-13

(6) CASING/LINER

Csng	Lnr	Dia	From	To	Gauge	Steel	Plastic	Welded	Thrd
OK		12	2	38	250	OK		OK	

Shoe Inside Outside Other Location of shoe(s) 38
Temporary casing Yes Diameter _____ From _____ To _____

(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.
License Number _____ Date _____
Signed _____

(7) PERFORATIONS/SCREENS

Perf	Scrn	Csng	Lnr	Screen Dia	From	To	Screen/ slot width	Slot length	# of slots	Tele/ pipe size

(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.
License Number 1816 Date 5-6-15
Signed [Signature]
Contact Info. (optional)
541-519-0618

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
700 392 600 4 hr.
Temperature 60 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS _____ ppm
From To Description Amount Units

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START CARD # 209069

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ORIGINAL LOG #

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

(1) LANDOWNER

Owner Well I.D.

First Name Bert Last Name Siddoway

Company P.R. King Ranches Inc.

Address P.O. Box 115

City Dunbar State OK Zip 77905

(2) TYPE OF WORK New Conversion Deepening
 Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth _____ ft.

Seal Material _____

Casing Type: Steel Plastic Other _____

Casing Gauge _____ Casing Diameter _____

(3) DRILL METHOD Rotary Air Rotary Mud Auger

Cable Cable Mud Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community

Industrial/Commercial Livestock Dewatering Injection

Thermal Other _____

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 600 ft. Special Standard: Yes (attach copy)

BORE HOLE			SEAL			Amount	sacks/lbs
Dia	From	To	Material	From	To		
14	0	26	Bent	0	26		41
12	26	600					

How was seal placed: Method A B C D E

Other poured dry

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:

Calculated Amount Proposed to be Used: _____ sacks/lbs

Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
<input checked="" type="checkbox"/>	12		2	38	.250	<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	

Shoe Inside Outside Other Location of shoe(s) 38

Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type _____ Material _____

Perf	Scrn	Casing Liner	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size

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

Pump Bailer Air Flowing Artesian

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

700 592 600 4 hr.

Temperature 60 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below) TDS _____ ppm

From _____ To _____ Description _____ Amount _____ Units _____

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Baker Twp 11 N or S Range 43 E or W W.M.

Sec 19 SE 1/4 of the NE 1/4 Tax Lot 2600

Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD

Long _____ " or _____ DMS or DD

Street Address of Well (or nearest address) .5 miles west on

Burnt R. Canyon Rd.

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well/Pre-Alteration				
Completed Well	<u>4-4-13</u>			<u>8</u>

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found _____

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>3-19-13</u>	<u>11</u>	<u>12</u>	<u>4</u>			<u>10</u>
<u>3-21-13</u>	<u>60</u>	<u>200</u>	<u>200</u>			<u>8</u>
<u>3-27-13</u>	<u>200</u>	<u>400</u>	<u>300</u>			<u>5</u>
<u>4-4-13</u>	<u>400</u>	<u>600</u>	<u>200</u>			<u>7</u>

(11) WELL LOG

Ground Elevation _____

Material	From	To
<u>Top Soil</u>	<u>0</u>	<u>2</u>
<u>Blow clay</u>	<u>2</u>	<u>11</u>
<u>Soft Blue Clay Sand</u>	<u>11</u>	<u>12</u>
<u>Blue Clay</u>	<u>12</u>	<u>18</u>
<u>Hard Blue Clay</u>	<u>18</u>	<u>600</u>
<u>Hard Blue Clay w/ sandstone</u>	<u>600</u>	<u>600</u>

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JUN 13 2013

SALEM, OR

Date Started 3-19-13 Completed 4-4-13

(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.

License Number _____ Date _____

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. 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.

License Number 1816 Date 5-6-13

Signed [Signature]

Contact Info. (optional)

541-519-0618