

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

BAKE 52329

WELL I.D. LABEL# L

109108

START CARD #

1020726

1/18/2014

ORIGINAL LOG #

BAKER 52262

(1) LAND OWNER

Owner Well I.D.
First Name BRAD Last Name ALLEN
Company
Address 48748 MCCARTY BRIDGE RD
City NORTH POWDER State OR Zip 97867

(2) TYPE OF WORK

New Well Deepening Conversion
Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrld
Seal: Material From To Amt sacks/lbs

(3) DRILL METHOD

Rotary Air Rotary Mud Cable Auger Cable Mud
Reverse Rotary Other

(4) PROPOSED USE

Domestic Irrigation Community
Industrial/ Commercial Livestock Dewatering
Thermal Injection Other

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 566.00 ft. Special Standard (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, sacks/lbs. Row 1: 14, 0, 27, Bentonite, 0, 27, 21, S

How was seal placed: Method A B C D E

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrld

Shoe Inside Outside Other Location of shoe(s)

Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method Holt Perforater

Screens Type Material

Table with columns: Perf, Casing/Screen, Dia, From, To, Scrn/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)

Table with 4 columns for test results

Temperature F Lab analysis Yes By

Water quality concerns? Yes (describe below) TDS amount

From To Description Amount Units

Table with 5 columns for water quality concerns

(9) LOCATION OF WELL (legal description)

County BAKER Twp 8.00 S N/S Range 39.00 E E/W WM
Sec 17 NW 1/4 of the NW 1/4 Tax Lot 3200
Tax Map Number Lot
Lat DMS or DD
Long DMS or DD

Street address of well Nearest address

44963 POCAHONTAS RD HAINES

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Rows for Existing Well / Pre-Alteration and Completed Well

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found

SWL Date From To Est Flow SWL(psi) + SWL(ft)

Table with 6 columns for water bearing zones

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To

Date Started 8/15/2013 Complete 8/20/2013

(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.

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.

License Number 1606 Date 1/18/2014

Signed JOHN MARCIEL (E-filed)

Contact Info (optional)