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

BAKE 52349

7/24/2014

WELL I.D. LABEL# L 113676
START CARD # 1023058
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name BILL Last Name PIERCE
Company
Address 44062 OLD WINGVILLE RD
City BAKER CITY State OR Zip 97814

(2) TYPE OF WORK

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

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:									

	Material	From	To	Amt	sacks/lbs
Seal:					

(3) DRILL METHOD

[X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE

[ ] Domestic [X] Irrigation [ ] Community
[ ] Industrial/ Commericial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)
Depth of Completed Well 500.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs
18	0	125	Bentonite Chips	0	23	26	S
14	125	500	Cement	23	125	85	S

How was seal placed: Method [ ] A [ ] B [X] C [ ] D [ ] E
[X] Other POURED DRY
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

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
(•)	( )	12	[X]	2	500	0.25	(•)	( )	[X]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]

Shoe [ ] Inside [ ] Outside [X] Other Location of shoe(s)
Temp casing [X] Yes Dia 16 From 0 To 122

(7) PERFORATIONS/SCREENS

Perforations Method AIR KNIFE
Screens Type Material

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Casing	12	240	495	.125	1	12240	

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

( ) Pump ( ) Bailer (•) Air ( ) Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
1000		495	1.5
800		300	0.5

Temperature 46 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County BAKER Twp 8.00 S N/S Range 39.00 E E/W WM
Sec 22 SW 1/4 of the SW 1/4 Tax Lot 5400
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
(•) Street address of well ( ) Nearest address
44062 OLD WINGVILLE RD
BAKER CITY, OR 97814

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration			[ ]	
Completed Well	5/30/2014		[ ]	34

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 12.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
5/15/2014	12	16	5		[ ]	10
5/16/2014	74	88	10		[ ]	34
5/20/2014	215	233	70		[ ]	34
5/22/2014	245	500	1000		[ ]	34

(11) WELL LOG

Ground Elevation

Material	From	To
SOIL	0	4
BROWN CLAY, GRAVEL	4	12
GRAVEL, SAND	12	16
BROWN CLAY, GRAVEL	16	74
GRAVEL, SAND, BROWN CLAY	74	88
BROWN CLAY, SAND, GRAVEL	88	103
HEAVY BROWN CLAY, GRAVEL	103	215
GRAVEL, SAND, BROWN CLAY	215	233
BROWN CLAY, GRAVEL	233	245
GRAVEL, SAND W/ LAYERS OF BROWN CLAY	245	500

Date Started 5/14/2014 Complete 5/30/2014

(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 1775 Date 7/24/2014

Signed JASON ACQUISTAPACE (E-filed)

Contact Info (optional)

WATER SUPPLY WELL REPORT - continuation page

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ORIGINAL LOG #

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

Material	From	To	Amt	sacks/lbs

(5) BORE HOLE CONSTRUCTION

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

(7) PERFORATIONS/SCREENS

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

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

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

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

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

(11) WELL LOG

Material	From	To

Comments/Remarks