

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

WELL I.D. LABEL# L 107432
START CARD # 1026270
ORIGINAL LOG #

6/3/2015

(1) LAND OWNER
Owner Well I.D.
First Name JASON Last Name WILLIAMS
Company HAY INC.
Address 65579 WOLF CREEK LN
City NORTH POWDER State OR Zip 97867

(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/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION
Special Standard [] (Attach copy)
Depth of Completed Well 1101.00 ft.
BORE HOLE SEAL sacks/lbs
Dia From To Material From To Amt lbs
16 0 299 Cement w/5% Bentonite 0 299 13000 P
12 299 1101 Calculated 11077
Calculated

How was seal placed: Method [] A [X] B [] C [] D [] E
[] Other
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
Shoe [] Inside [] Outside [] Other Location of shoe(s)
Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [X] Bailer [] Air [] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
800 180 400 24

Temperature 58 °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 7.00 S N/S Range 39.00 E E/W WM
Sec 4 SE 1/4 of the SE 1/4 Tax Lot 701
Tax Map Number Lot
Lat " or " DMS or DD
Long " or " DMS or DD
[] Street address of well [X] Nearest address
48857 HIGHWAY 30

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 5/13/2015 108.3
Flowing Artesian? [] Dry Hole? []
WATER BEARING ZONES Depth water was first found 504
SWL Date From To Est Flow SWL(psi) + SWL(ft)
5/9/2015 504 854 600 108
5/11/2015 1000 1060 200 108

(11) WELL LOG
Ground Elevation
Material From To
Brown sandy clay 0 3
White clay stone/sand stone 3 6
Gray rock w/ brown fractures soft 6 86
Void 86 89
Gray fractured rock medium 89 140
Gray rock, less fractures hard 140 195
Black fractured rock hard 195 204
Gray black brkn medium 204 211
Gray hard rock 211 230
Gray black and white rock brkn soft 230 247
Gray rock hard 247 255
Black rock med 255 259
Gray basalt hard 259 278
Black and white rock hard 278 303
Black rock w/ brown frac med 303 320
Black and brown frac rock w/ white seams 320 327
same as above w/ thick white rock seams 327 443
White and black granite hard 443 454
White and black granite brkn hard 454 504

Date Started 5/1/2015 Completed 5/13/2015

(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 JUL 13 2015

(bonded) Water Well Constructor Certification SALEM OR
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 1937 Date 6/3/2015
Signed BRENDAN PECK (E-filed)
Contact Info (optional)

