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

BAKE 52531
11/4/2016

WELL I.D. LABEL# L 122671
START CARD # 1032754
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name CHRIS & HILLARY Last Name LAY
Company
Address 34336 STICES GULCH
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

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

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] (Attach copy)
Depth of Completed Well 80.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs
10	0	18	Bentonite Chips	0	18	10	S
6	18	80			Calculated	8.22	
					Calculated		

How was seal placed: Method [ ] A [ ] B [ ] 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
(•)	( )	6	[X]	2	58	.250	(•)	( )	[X]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]
( )	( )		[ ]				( )	( )	[ ]	[ ]

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

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type Material

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

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
60		80	1

Temperature 55 °F Lab analysis [ ] Yes By
Water quality concerns? [ ] Yes (describe below) TDS amount 713 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County BAKER Twp 11.00 S N/S Range 40.00 E E/W WM
Sec 19 NE 1/4 of the SW 1/4 Tax Lot 1000
Tax Map Number Lot
Lat ° ' " or 44.59225000 DMS or DD
Long ° ' " or -117.85996500 DMS or DD
(•) Street address of well ( ) Nearest address
34336 STICES GULCH

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration			[ ]	
Completed Well	10/27/2016	1	[X]	2.3

Flowing Artesian? [X] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 60.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
10/27/2016	60	80	60	1	[X]	2.3
					[ ]	
					[ ]	
					[ ]	
					[ ]	

(11) WELL LOG

Ground Elevation

Material	From	To
BROWN BASALT, CLAY	0	6
BLACK BASALT	6	60
FRACTURED BLACK BASALT, GRAY CLAY	60	80

Date Started 10/26/2016 Completed 10/27/2016

(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 11/4/2016

Signed STEVEN J COLEY (E-filed)

Contact Info (optional)