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

BAKE 52581

WELL I.D. LABEL# START CARD# ORIGINAL LOG#

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	1036003	

(as required by ORS 537.765 & OAR 690-205-0210)	1/7/2018	ORIGINAL LOG #	<i>‡</i>	
(1) LAND OWNER Owner Well I.D.			_ \	
First Name TERRY Last Name INSCOE	(9) Lo	OCATION OF WELL (legal	description)	
Company		BAKER Twp 7.00 S	-	E E/W WM
Address 47759 ANTHONY LAKES HWY		SW 1/4 of the NW		
City NORTH POWDER State OR Zip 97867 2) TYPE OF WORK New Well Deepening Conversi	$=$ $\int_{\text{Tax Ma}}^{\text{Sec}} \frac{3}{\text{Ma}}$	n Number	Lot	
2) TYPE OF WORK New Well Deepening Conversi	ion Lat	° "or		DMS or DD
Alteration (complete 2a & 10) Abandonment(complete 2a & 10)	lete 5a) Long —	p Number' or' or		DMS or DD
2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd	Long _	Street address of well	Vearest address	
Casing:	47759	ANTHONY LAKES HWY NORTH		
Material From To Amt sacks/lbs				
Seal:				
3) DRILL METHOD	(10) S	TATIC WATER LEVEL		
Rotary Air Rotary Mud Cable Auger Cable Mud	Ev	Da isting Well / Pre-Alteration	te SWL(psi) +	SWL(ft)
Reverse Rotary Other		mpleted Well 9/7/2017		4
4) PROPOSED USE Domestic Irrigation Community	🖰	Flowing Artesian?		1 4
Industrial/ Commercial X Livestock Dewatering	MA TED		water was first found	15.00
Thermal Injection Other				
		Date From To E	Est Flow SWL(psi)	+ SWL(ft)
5) BORE HOLE CONSTRUCTION Special Standard (Atta	(ch copy) 8/29	/2017 15 20	10	9
Depth of Completed Well 640.00 ft.	9/5/2	2017 160 535	500	4
BORE HOLE SEAL	sacks/			
Dia From To Material From To Amt 12 0 33.5 Bentonite Chips 0 2 2	lbs S			
8 33.5 640 Calculated 2				
Cement 2 33.5 17	S	TELL LOC		
Calculated 16	(11) W	FLL LOG Ground Elevat	ion	
How was seal placed: Method A B XC D	∃	Material	From	То
Other	top soil		0	4
Backfill placed from ft. to ft. Material		y med hard	4	15
Filter pack from ft. toft. MaterialSize		tan clay hard	15	100
Explosives used: Yes Type Amount	Tan cla	nd sandy gravel med hard	100	160 225
Sa) ABANDONMENT USING UNHYDRATED BENTONITE			225	265
Proposed Amount Actual Amount		tan clay med hard	265	318
		gray clay med hard	318	487
6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wlo	a inta i	clay and small gravel med hard	487	535
		y med hard	535	580
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Brown	basalt med hard	580 590	590
	Gray na	ard basalt	390	640
Shoe Inside Outside Other Location of shoe(s) 33.5				
Temp casing Yes Dia From + To				
PERFORATIONS/SCREENS	-			
Perforations Method	.			
Screens Type Material	Date S	Started8/24/2017 Cor	mpleted <u>9/7/2017</u>	
	Tele/			
Screen Liner Dia From To width length slots pi	IPC BIZE	nded) Water Well Constructor Certify that the work I performed on the		ning alteration or
		onment of this well is in complian		
		action standards. Materials used and		
	the bes	t of my knowledge and belief.	•	
	License	e Number	Date	
WELL TESTS: Minimum testing time is 1 hour				
Pump Bailer (a) Air Flowing Artes	Signed Signed			
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)		d) Water Well Constructor Certific	ation	
500 160 1	¬ l`	et responsibility for the construction,		n. or abandonmen
		erformed on this well during the const		
	perforn	ned during this time is in complian	nce with Oregon w	vater supply wel
Temperature 60 °F Lab analysis Yes By	constru	ction standards. This report is true to	the best of my know	ledge and belief.
Water quality concerns? Yes (describe below) TDS amount 60		e Number 1606	Date 1/7/2018	
From To Description Amount Un	nits			
	Signed	voint in intelle (E intel)		
	Contact	t Info (optional)		
ORIGINAL - WATER RESOL	IRCES DEPARTM	IFNT		