

1213
1059628
BAKER
50073

3/21/2023

(1) LAND OWNER

Owner Well I.D. \_\_\_\_\_  
 First Name \_\_\_\_\_ Last Name \_\_\_\_\_  
 Company BAKER CATTLE FEEDERS  
 Address SCHATKY RD  
 City BAKER CITY State OR Zip 97814

(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	Thrd
8	8	X	1	110	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Material			From	To	Amt	sacks/lbs			

Seal: \_\_\_\_\_

(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

Special Standard  (Attach copy)

Depth of Completed Well 522.00 ft.

BORE HOLE		SEAL		sacks/lbs		
Dia	From	To	Material	From	To	Amt
12	0	19	Bentonite	0	19	23
10	19	110				Calculated
8	110	130				
8	130	522				Calculated

How was seal placed: Method  A  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
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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)
100		500	2

Temperature 54 °F Lab analysis  Yes By \_\_\_\_\_

Water quality concerns?  Yes (describe below) TDS amount 10 ppm  
 From \_\_\_\_\_ To \_\_\_\_\_ Description \_\_\_\_\_ Amount \_\_\_\_\_ Units \_\_\_\_\_

(9) LOCATION OF WELL (legal description)

County BAKER Twp 8.00 S N/S Range 40.00 E E/W WM  
 Sec 3 SE 1/4 of the NW 1/4 Tax Lot 800  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ ' \_\_\_\_\_ " or 44.89933670 DMS or DD  
 Long \_\_\_\_\_ ' \_\_\_\_\_ " or -117.80409431 DMS or DD  
 Street address of well  Nearest address

SCHATKY RD 1/2 MILE EAST OF HWY I 84

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration	12/23/2022			89
Completed Well	12/31/2022			89

Flowing Artesian?  Dry Hole?

WATER BEARING ZONES

Depth water was first found \_\_\_\_\_

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

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
12/27/2022	72	130	100		89

(11) WELL LOG

Ground Elevation \_\_\_\_\_

Material	From	To
Previous well	0	130
Gray hard basalt	130	387
Gray med hard basalt	387	401
Gray hard basalt	401	522

Date Started 12/23/2022 Completed 12/31/2022

(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 1606 Date 3/21/2023

Signed JOHN MARCIEL (E-filed)

Contact Info (optional) \_\_\_\_\_

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

BAKE 52938

3/21/2023

Map of Hole

