

STATE OF OREGON
WATER SUPPLY WELL REPORT

BAKE 53009

WELL I.D. LABEL# L153452

START CARD # 1073918

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

7/11/2024

(1) LAND OWNER

Owner Well I.D. _____

First Name KYLELast Name ROWLAND

Company _____

Address 12832 BULGER FLAT LANECity HAINESState ORZip 97833

(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

Seal:

Material	From	To	Amt	sacks/lbs

(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 815.00 ft.

BORE HOLE			SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs
15	0	55	Bentonite	0	40	60	S
12	55	205	Calculated			30	
10	205	815	Cement with 3% Bento	40	55	17	S
			Calculated			8	

Seal placement method ☐ A ☒ B ☒ C ☐ D ☐ E ☒ Other: POURED DRYBackfill placed from 185 ft. to 205 ft. Material Cement

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____Seal Placement Begin Date 6/25/2024 Begin Time 15 00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount

Actual Amount

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	10	X	1	205	0.25	ST	X			

Temp casing ☒ Yes Dia 16 From + 1 To 15

(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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	40		810	2

Temperature 61 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 91 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County BAKER Twp 7.00 S N/S Range 38.00 E E/W WMSec 17 SE 1/4 of the SE 1/4 Tax Lot 4500

Tax Map Number _____ Lot _____

Lat _____ " or 44.95176055 DMS or DD

Long _____ " or -118.07842666 DMS or DD

☒ Street address of well ☐ Nearest address12832 BULGER FLAT

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	7/3/2024			75
Flowing Artesian?		<input type="checkbox"/>	Dry Hole?	
		<input type="checkbox"/>		

WATER BEARING ZONES

Depth water was first found 120.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
6/24/2024	122	144	15			75
7/1/2024	339	363	10			75
7/1/2024	402	411	8			75
7/2/2024	488	512	10			75
7/2/2024	521	633	8			75

(11) WELL LOG

Ground Elevation 4253.05 FT

Material	From	To
SOIL	0	2
BROWN CLAY, GRAVEL	2	12
DECOMPOSED GRANITE, BROWN	12	43
DECOMPOSED GRANITE, TAN, HARD	43	75
DECOMPOSED GRANITE, BROWN	75	91
DECOMPOSED GRANITE, CREAM	91	122
DECOMPOSED GRANITE, TAN, SAND	122	144
DECOMPOSED GRANITE, CREAM	144	231
DECOMPOSED GRANITE, BROWN	231	257
DECOMPOSED GRANITE, CREAM, HARD	257	285
DECOMPOSED GRANITE, TAN	285	294
DECOMPOSED GRANITE, CREAM, HARD	294	339
DECOMPOSED GRANITE, TAN, SAND	339	363
DECOMPOSED GRANITE, CREAM	363	402
DECOMPOSED GRANITE, BROWN	402	411
DECOMPOSED GRANITE, PINK	411	512
DECOMPOSED GRANITE, PINK/RED/BROWN	512	521
DECOMPOSED GRANITE, CREAM	521	633
DECOMPOSED GRANITE, TAN, SAND	633	747

Construction

Begin Date 6/19/2024 Begin Time 09 00 End Date 7/3/2024

(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 7/11/2024Signed JASON ACQUISTAPACE (E-filed)Drilling Company: EARTH & WATER WORKS, INC.

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

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

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7/11/2024

Map of Hole

