WELL I.D. LABEL# L 106797 STATE OF OREGON WATER SUPPLY WELL REPORT START CARD# 1016025 (as required by ORS 537.765 & OAR 690-205-0210) **ORIGINAL LOG#** CROOK (1) LAND OWNER Owner Well I.D. First Name Last Name (9) LOCATION OF WELL (legal description) Company OREGON PARKS AND RECREATION County <u>crook</u> Twp <u>17.00 S</u> N/S Range <u>16.00 E</u> E/W WM Address 725 SUMMER ST NE SUITE C Sec 10 NE 1/4 of the SW 1/4 Tax Lot 100 City SALEM State OR Zip 97301 Tax Map Number (2) TYPE OF WORK New Well Deepening Conversion " or 44.11250000 Lat Alteration (complete 2a & 10) | Abandonment(complete 5a) " or -120.79431000 Long DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address Stl Pistc Wld Thrd Gauge BIG BEND CAMPGROUND HWY 27 PRINEVILLE, OR Material Amt sacks/lbs Seal: (3) DRILL METHOD (10) STATIC WATER LEVEL Rotary Air Rotary Mud Cable Auger Cable Mud SWL(psi) + SWL(ft) Existing Well / Pre-Alteration Reverse Rotary Other Completed Well 3/20/2012 Dry Hole? (4) PROPOSED USE X Domestic Irrigation Community Flowing Artesian? Industrial/ Commericial Livestock Dewatering WATER BEARING ZONES Depth water was first found 42.00 Thermal \_\_\_\_ Injection \_\_\_\_ Other SWL Date Est Flow SWL(psi) + SWL(ft) From To (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 3/8/2012 44 42 Depth of Completed Well 165.00 ft. 3/9/2012 159 37 **BORE HOLE** SEAL sacks/ Dia To From Material From To Amt lbs 11.75 52 Bentonite Chips 52 44 8 52 165 (11) WELL LOG Ground Elevation How was seal placed: Method From To X Other POURED DRY 0 1 SAND, GRAVEL, BROWN CLAY 9 Backfill placed from ft to ft. Material BROKEN BASALT, GRAY 9 11 Filter pack from ft. Material ft. to BASALT, GRAY 34 Explosives used: Yes Type\_\_ Amount 34 42 BASALT, TAN (5a) ABANDONMENT USING UNHYDRATED BENTONITE FRACTURED BASALT, BROWN 42 44 Proposed Amount **Actual Amount** BASALT, TAN 44 62 62 81 BASALT, BLACK (6) CASING/LINER Casing Liner BASALT, GRAY 81 84 From To Stl Plstc Wld Thrd Gauge 107 BASALT, BLACK 84 X  $\odot$ 165 0.25 2 BASALT, GRAY 107 134 BASALT, BLACK 134 141 BASALT, GRAY 141 148 BASALT, BLACK 148 154 FRACTURED BASALT, BLACK 154 159 Shoe Inside Outside X Other Location of shoe(s) BASALT, BLACK 159 165 Temp casing X Yes Dia 10 From 0 (7) PERFORATIONS/SCREENS Perforations Method\_TORCH Screens Type Material Date Started 3/6/2012 Complete <u>3/20/2012</u> # of Tele/ Perf/ Casing/ Screen Scrn/slot Slot (unbonded) Water Well Constructor Certification Screen Liner To <u>slots</u> pipe size From width ength I certify that the work I performed on the construction, deepening, alteration, or Perf Casing 165 .125 135 60 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 (8) WELL TESTS: Minimum testing time is 1 hour Signed Pump O Bailer Tlowing Artesian Air Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) (bonded) Water Well Constructor Certification 30 163 1.5 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. °F Lab analysis X Yes By BOX R LAB Temperature 55 Yes (describe below) TDS amount License Number 1775 Date 3/23/2012 Water quality concerns? Description Amount Units Signed JASON ACQUISTAPARECEIVED BY OWRD Contact Info (optional) JASON ACQUISTAPACE 541-910-4152 ORIGINAL - WATER RESOURCES DEPARTMENT

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

CROO 54056

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