

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 65454
START CARD # 157844

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Well Number _____
Name Santa Anita Lodge Inc.
Address 36975 Agness Illahe Road
City Agness State Or Zip 97406

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 360 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Sacks or pounds	
Diameter	From	To	Material	From	To
10"	0	25	Bentonite	0	25
6"	25	360			

How was seal placed: Method A B C D E
 Other Poured dry
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	+1	25	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	-5	350	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material PVC

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
350	360	0.10		4"	10'	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
15		360	1 hr.

Temperature of water 50 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Curry Latitude _____ Longitude _____
Township 34S N or S Range 11W E or W. WM.
Section 19 B 1/4 C 1/4
Tax Lot 3000 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 36975 Agness Illahe Rd.
Agness, Oregon

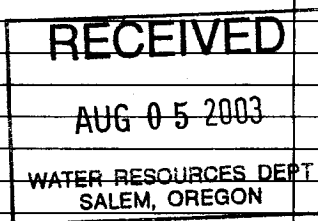
(10) STATIC WATER LEVEL:
22 ft. below land surface. Date 7/29/03
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 339'

From	To	Estimated Flow Rate	SWL
339'	340'	15	22'

(12) WELL LOG:
Ground Elevation _____

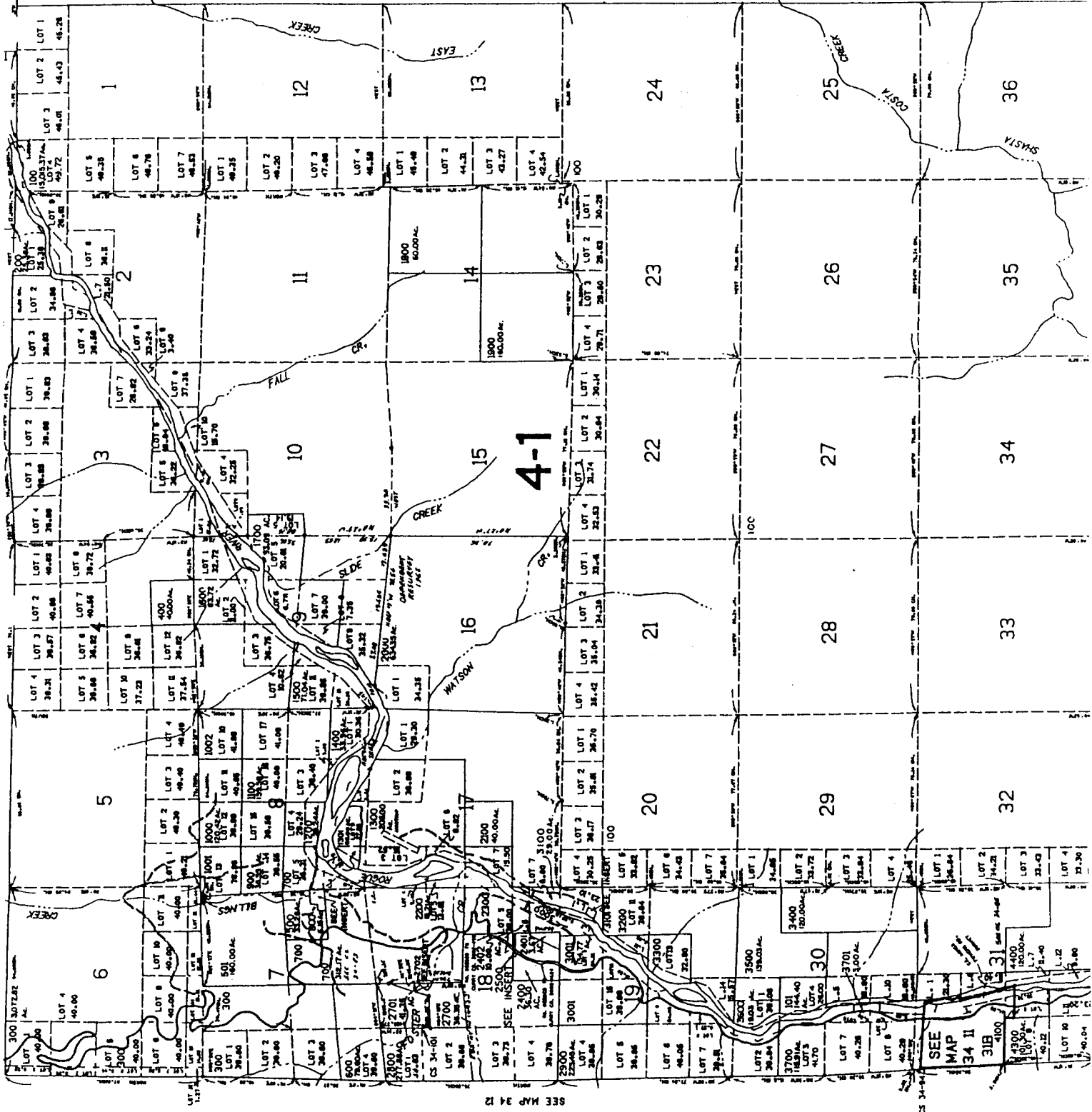
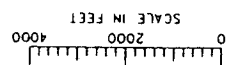
Material	From	To	SWL
Sandy Soil & Clay	0	25	
Claystone & Sandstone	25	360	22



Date started 7/28/03 Completed 7/29/03

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, 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.
WWC Number _____
Signed _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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.
WWC Number 709
Signed [Signature] Date 8/3/03



INSERT SEC. 7
1" = 400'

34 II
& Index

INSERT SEC. 18
1" = 200'

25000
0.356 AC.

INSERT SECTION 19
1" = 400'

CURR 51004
3101
2.10 AC.

INSERT SEC. 18
1" = 400'



1. APPROXIMATE
2. SURVEYED
3. CORRECTED
4. RECALCULATED
5. RECHECKED
6. RECORDED
7. RECORDED
8. RECORDED
9. RECORDED
10. RECORDED
11. RECORDED
12. RECORDED

Revised
5/1/02, DE

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& INDEX

SEE MAP 34 12

SEE MAP 34 11

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AUG 05 2003
WATER RESOURCES DEPT
SALEM, OREGON