| Page | е# | of | ## |
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| | | | Page # 01 ## |
|-----------------------------|--------|--------|--------------|
| WELL LABEL # L START CARD # | | | |
| | | | |
| OF WELL (legal d | escrip | otion) | |
| Twn | N/S | Pango | E /\\/ \\/\\ |

| (1) LAND OWNER Owner Well I.D. | (9) LOCATION OF WELL (legal description) |
|---|--|
| First Name Last Name | County Twp N/S Range E/W WM |
| Company | Sec 1/4 of the 1/4 Tax Lot |
| Address State 7in | Tax Map Number Lot |
| City State Zip | Lat "or DMS or DD |
| | Long DMS or DD |
| (2) TYPE OF WORK New Well Deepening Conversion Alteration (repair/recondition) Abandonment | Street address of well Nearest address |
| (2) DDU L METHOD | |
| (3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other | (10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) |
| (4) PROPOSED USE Domestic Irrigation Community | Existing Well / Predeepening Completed Well |
| Industrial/ Commercial Livestock Dewatering | Flowing Artesian? Dry Hole? |
| Thermal Injection Other | WATER BEARING ZONES Depth water was first |
| (5) BORE HOLE CONSTRUCTION Special Standard Attach copy | |
| Depth of Completed Well ft. | The state of the s |
| BORE HOLE SEAL sacks/ | |
| Dia From To Material From To Amt Ibs | |
| | |
| | |
| | (11) WELL LOG Ground Elevation |
| How was seal placed: Method A B C D E | Material From To |
| Other | That or discount of the control of t |
| Backfill placed from ft. to ft. Material | |
| Filter pack from ft. to ft. Material Size | |
| Explosives used: Yes Type Amount | |
| | |
| (6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd | |
| | |
| | |
| | |
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| | |
| Shoe Inside Outside Other Location of shoe(s) | |
| Temp casing Yes Dia From To | |
| (7) PERFORATIONS/SCREENS | |
| Perforations Method | |
| Screens Type Material | |
| Perf/ Casing Screen Scrn/slot Slot # of Tele/ | |
| Scree /Liner Dia From To width lengt slots pipe | Date Started Completed |
| n h size | (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. |
| (a) M(F) TF0T0 11 11 11 11 11 11 11 | , , |
| (8) WELL TESTS: Minimum testing time is 1 hour | License Number Date |
| Pump Bailer Air Flowing Artesian | Electronically Filed |
| Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) | 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 |
| Temperature °F Lab analysis Yes By | reported above. All work performed during this time is in compliance with |
| Temperature °F Lab analysis Yes By Water quality concerns? Yes (describe below) | Oregon water supply well construction standards. This report is true to the best |
| From To Description Amount Units | of my knowledge and belief. License Number Date |
| | Electronically Filed |
| | Signed |
| | Contact Info |
| | (optional) |

| (5) BC | ORE HOL | E CO | NS ⁻ | TRUCTIO | N | | | | |
|------------|---------------------|------|-----------------|---------|------|------|----|-----|--------|
| В | BORE HOLE SEAL | | | | | | | | sacks/ |
| Dia | From | To | | Mater | ial | From | To | Amt | lbs |
| | | | | | | | | | |
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| | FILTER I | PACK | | | | | | | |
| <u>_</u> F | From | To | Ma | iterial | Size | | | | |
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| L | | | | | | | | | |
| //\ CI | (/) CACING /I INITD | | | | | | | | |
| (o) CF | (6) CASING/LINER | | | | | | | | |

| Casing Liner | Dia | + | From | To | Gauge | Stl Plstc Wld Thrd |
|--------------|-----|---|------|----|-------|--------------------|
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Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

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

| Water Quality Concerns | | | | | | | | |
|------------------------|----|-------------|----------|-------|--|--|--|--|
| From | To | Description | Amount l | Jnits | | | | |
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| (10) STATIC WATER LEVE | L |
|------------------------|---|
| Water Bearing Zones | |

| SWL Date | From | To | Est Flow | SWL(psi) | + SWL(ft) |
|----------|------|----|----------|----------|-----------|
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(11) WELL LOG

| Material | From | To |
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| Comments/Remarks |
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| COMMITTEE IT STATE IT ALL INS |

| WATER SUPPLY WELL REPORT - | WELL I.D. # L | ——— Page # of ## | |
|----------------------------|---------------|------------------|--|
| continuation page | START CARD# | i age π οι ππ | |
| Map of well | | | |
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| WATER SUPPLY WELL REPORT - continuation page | WELL I.D. # L | Page # of ## |
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| | START CARD # | |
| Map of well | | |
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