

desc 51145

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AMENDED LOG

STATE OF OREGON WATER RESOURCES DEPT. SALEM, OREGON

L16358

(START CARD) # 104259 104263

(1) OWNER: Name: Central Oregon Pumice Co. Address: 1 NW Greenwood Ave City: Bend State: OR Zip: 97701

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [X] Other: Quasi Mun

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well: 503 ft. Explosives used [] Yes [X] No Type: Amount:

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Row 1: 13, 0, 19, Cement, 0, 19, 10 SACKS. Row 2: 10, 19, 503, -, -, -

How was seal placed: Method [] A [] B [X] C [] D [] E [] Other. Backfill placed from: ft. to: ft. Material: Gravel placed from: ft. to: ft. Size of gravel:

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 10, +1, 19, .25, [X], [], [X], []. Liner: 8, -1, 503, .25, [X], [], [X], [].

(7) PERFORATIONS/SCREENS: [X] Perforations Method: Factory [] Screens Type: Material: From: 400 To: 503 Slot size: 1/8 x 3/32 Number: 3200 Diameter: 8 Casing: [] Liner: [X]

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [X] Air [] Flowing Artesian. Yield gal/min: 200+ Drawdown: Drill stem at: Time: 1 hr.

Temperature of water: 54 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: Deschutes Latitude: Longitude: Township: 17S N or S Range: 11E E or W. WM. Section: 35 NW 1/4 SE 14 Tax Lot: 6201 Lot: Block: Subdivision: Street Address of Well (or nearest address): Skyliner Rd

(10) STATIC WATER LEVEL: 340 ft. below land surface. Date: 10/1/97 Artesian pressure: lb. per square inch. Date:

(11) WATER BEARING ZONES: Depth at which water was first found: 448

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 448, 504, 200+, 340

(12) WELL LOG: Ground Elevation:

Table with columns: Material, From, To, SWL. Rows: Top Soil (0-15), Basalt (15-25), Pumice (25-90), Basalt blk gray med hrd (90-180), Lava blk red soft (180-220), Basalt gray hrd (220-239), Basalt gray blk med frac hrd (239-270), Volcanic - lost circ (270-275), Basalt gray hrd (275-285), Cinder lava red soft (285-315), Lava blk med porous (315-335), Cinder red soft (335-351), Basalt pumice cong (351-368), Wk lay Lin (368-375), Basalt gray med- hrd (375-435), Pumice clay to var red (435-444), Lava blue gray red soft (444-444)

Date started: Completed:

(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.

Signed: [Signature] WWC Number: 1761 Date: 10/1/97

(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.

Signed: [Signature] WWC Number: 1123 Date: 10/1/97

desc 51145

STATE OF OREGON WATER RESOURCES DEPT. WATER SUPPLY WELL REPORT SALEM, OREGON

L16358 (START CARD) # H-4059-104263

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

1) OWNER: Well Number
Name Central Oregon Municode Co
Address 1 NW Greenwood Ave
City Bend State OR Zip 97701

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 ___ ft.
Explosives used [] Yes [] No Type ___ Amount ___

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds

How was seal placed: Method [] A [] B [] C [] D [] E []
Other []
Backfill placed from ___ ft. to ___ ft. Material ___
Gravel placed from ___ ft. to ___ ft. Size of gravel ___

Table for CASING/LINER with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Tele/pipe size, Casing, Liner

8) WELL TESTS: Minimum testing time is 1 hour
Pump [] Bailer [] Air [] Flowing Artesian []
Yield gal/min Drawdown Drill stem at Time

Temperature of water ___ 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 Deschutes Latitude ___ Longitude ___
Township 17S N or S Range 11E E or W. WM.
Section 35 NW 1/4 SE 1/4
Tax Lot 6201 Lot ___ Block ___ Subdivision ___
Street Address of Well (or nearest address) Skyliner Rd

10) STATIC WATER LEVEL:
___ ft. below land surface. Date ___
Artesian pressure ___ lb. per square inch. Date ___

11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

12) WELL LOG: Ground Elevation ___

Table for WELL LOG with columns: Material, From, To, SWL

Date started 9/23/97 Completed 10/6/97

(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.
Signed Greg A. [Signature] WWC Number 1701 Date 10/6/97

(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.
Signed [Signature] WWC Number 123 Date 10/6/97