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STATE OF OREGON WATER WELL REPORT (as required by ORS 537.765)

GILL 122 OCT - 3 1988

2N/21E/29 PERMIT # G-10808

(1) OWNER: Name WASTE MANAGEMENT OF OREGON Address STAR RT BOX 6 ARLINGTON State Oregon Zip 97812

(2) TYPE OF WORK: [X] New Well [ ] Deepen [ ] Recondition [ ] Abandon

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

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

(5) BORE HOLE CONSTRUCTION: Depth of Completed Well 498 ft. Construction approval Yes [ ] No [X] Explosives used [ ] Type [ ] Amount [ ]

Table with columns: HOLE Diameter, SEAL Material, Amount sacks or pounds. Rows for 0-135 and 10-498 ft.

How was seal placed: Method [ ] A [ ] B [X] C [ ] D [ ] E 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. Rows for Casing (10 inch) and Liner (8 inch).

Final location of shoe(s) [ ]

PERFORATIONS/SCREENS:

[X] Perforations Method TORCH CUT [ ] Screens Type [ ] Material [ ]

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Rows for 35-277, 277-438, and 438-498.

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

Table with columns: Yield gal/min, Drawdown, Drill stem at, Time. Rows for 150 gal/min at 1 hr, 4 hrs, and 24 hrs.

Temperature of water 60 Depth Artesian Flow Found [ ] Was a water analysis done? [X] Yes By whom OWNER Did any strata contain water not suitable for intended use? [ ] Too little [ ] Salty [ ] Muddy [ ] Odor [ ] Colored [X] Other NO Depth of strata: [ ]

(9) LOCATION OF WELL by legal description: County GILLIAM Latitude [ ] Longitude [ ] Township 2 N or S, Range 21 E or W, WM. Section 29 1/4 1/4 Tax Lot [ ] Lot [ ] Block [ ] Subdivision [ ] Street Address of Well (or nearest address) CEDARS SPRINGS RD

(10) STATIC WATER LEVEL: 148 ft. below land surface. Date 8/29/88 Artesian pressure [ ] lb. per square inch. Date [ ]

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL. Rows for 206-226, 226-290, and 290-498.

(12) WELL LOG: Ground elevation [ ]

Table with columns: Material, From, To, SWL. Rows for Light brown silty clay, Light brown claystone, Brown sandstone, Brown claystone, Grey/grey brown claystone, Black/brown gasalt, Grey/black basalt, Black basalt, Brown basalt, Grey/black basalt, Grey/black basalt, Grey/brown basalt, Grey/black basalt, rock occ black lava streaks.

Date started 8/22/88 Completed 9/21/88

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed [ ] WWC Number [ ] 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 well construction standards. This report is true to the best of my knowledge and belief. Signed [ ] WWC Number 1267 Date 9/27/88