

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

GRAN 51369

WELL I.D. LABEL# L 132705
START CARD # 1039408
ORIGINAL LOG #

10/3/2019

(1) LAND OWNER
Owner Well I.D.
First Name MARY Last Name MARCIEL
Company
Address 54874 HWY 26
City MT.VERNON State OR Zip 97865

(2) TYPE OF WORK
[X] New Well [] Deepening [] Conversion
[] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrld
Casing:
Material From To Amt sacks/lbs
Seal:

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

(4) PROPOSED USE
[] Domestic [X] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION
Special Standard [] (Attach copy)
Depth of Completed Well 560.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, sacks/lbs. Rows include Cement and Calculated values.

How was seal placed: Method [] A [] B [] C [X] D [] E
[] Other

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrld. Includes checked boxes for material types.

Shoe [] Inside [X] Outside [] Other Location of shoe(s) 500

Temp casing [] Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method Holt perforator

Table with columns: Perf, Casing/Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size.

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Values: 1100, 500, 6.

Temperature 56 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below) TDS amount 26 ppm

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County GRANT Twp 13.00 S N/S Range 30.00 E E/W WM

Sec 30 SE 1/4 of the NW 1/4 Tax Lot 4900

Tax Map Number Lot

Lat " or " DMS or DD

Long " or " DMS or DD

[X] Street address of well [] Nearest address

54874 HWY 26

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Values: 9/4/2019, 4.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 12.00

SWL Date From To Est Flow SWL(psi) + SWL(ft)

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Rows: 8/10/2019, 8/29/2019.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Rows: Top soil, Tan clay and gravel, Tan gravel soft, etc.

Date Started 8/8/2019 Completed 9/2/2019

(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.

License Number Date

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 reported above.

License Number 1606 Date 10/3/2019

Signed JOHN MARCIEL (E-filed)

Contact Info (optional)