

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

HARN 51945

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WELL LABEL # 51419
START CARD # 1019330
ORIGINAL LOG # HARN 50759

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

(1) LANDOWNER Owner Well I.D. _____
First Name _____ Last Name _____
Company DLR HAY CO. LLC
Address PO Box 3042
City PRINCETON State OR Zip 97721

(2) TYPE OF WORK New Conversion Deepening
 Alteration (complete Sections 2a & 10) Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth _____ ft.
Seal Material _____
Casing Type: Steel Plastic Other _____
Casing Gauge _____ Casing Diameter _____

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

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

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 762 ft. Special Standard: Yes (attach copy)

| BORE HOLE | | | SEAL | | | | Amount | Scks/lbs |
|-----------|------|-----|----------------|------|----|--|--------|----------|
| Dia | From | To | Material | From | To | | | |
| 16' | 0 | 185 | SEE HARN 50759 | | | | | |
| | 185 | 298 | | | | | | |
| | 298 | | | | | | | |

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

| Csng | Lintr | Dia | + | From | To | Gauge | Steel | Plastic | Welded | Thrd |
|------|-------|-----|---|------|----|-------|-------------|---------|--------|------|
| | | | | | | | JUL 01 2013 | | | |

RECEIVED BY OWRD
SALEM, OR

Shoe Inside Outside Other Location of shoe(s) _____
Temporary casing Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____

| Perf | Scrn | Csng | Lintr | Screen Dia | From | To | Screen/slot width | Slot length | # of slots | Tele/pipe size |
|------|------|------|-------|------------|------|----|-------------------|-------------|------------|----------------|
| | | | | | | | | | | |

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 200 Drawdown _____ Drill stem/Pump depth 600 Duration (hr) 1
Temperature 67 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS _____ ppm

| From | To | Description | Amount | Units |
|------|----|-------------|--------|-------|
| | | | | |

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 27 N of S Range 31 E of W.W.M.
Sec 07 NE 1/4 of the SW 1/4 Tax Lot 1200
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
Street Address of Well (or nearest address) HC 72 NARROWS RD.
PRINCETON

(10) STATIC WATER LEVEL

| | Date | SWL (psi) | + | SWL (ft) |
|------------------------------|----------------|-----------|---|------------|
| Existing Well/Pre-Alteration | | | | |
| Completed Well | <u>5-03-13</u> | | | <u>26'</u> |

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found 72'

| SWL Date | From | To | Est Flow | SWL (psi) | + | SWL (ft) |
|----------------|------------|------------|-------------|-----------|---|------------|
| <u>5-27-13</u> | <u>247</u> | <u>762</u> | <u>250+</u> | | | <u>26'</u> |

(11) WELL LOG Ground Elevation _____

| Material | From | To |
|--|------|-----|
| TAN VOLCANIC TUFF & CONGLOMERATE ROCK LAYERS | 185 | 247 |
| GRAY SAND-ROCK LAYERS | 247 | 256 |
| CONCL. ROCK & CLAY LAYERS | 256 | 270 |
| HARD BROKEN ROCK | 270 | 285 |
| VOLCANIC TUFF-ROCK-CLAY | 285 | 297 |
| CLAY-ROCK-SAND LAYERS | 297 | 458 |
| GRAY CLAY-SAND LAYERS | 458 | 522 |
| GRAY CLAYSTONE | 522 | 630 |
| SANDY GRAY CLAY | 630 | 644 |
| SOFT GRAY CLAY | 644 | 668 |
| GRAY CLAYSTONE CONGL. & CLAY LAYERS | 668 | 762 |

Date Started 3-27-13 Completed 5-03-13
(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. RECEIVED BY OWRD

License Number _____ Date _____
Signed _____ MAY 30 2013

(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. 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.
License Number 1355 Date 5-20-13
Signed Arthur L. Fry
Contact Info. (optional) _____