

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

WELL I.D. LABEL# L 111174
START CARD # 1020837
ORIGINAL LOG #

9/12/2013

(1) LAND OWNER

Owner Well I.D.
First Name CHUCK Last Name EGGERT
Company
Address 9955 SW POTANO ST
City TUALATIN State OR Zip 97062

(2) TYPE OF WORK

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

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD

[X] Rotary Air [] 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 350.00 ft

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 18, 0, 18, Bentonite Chips, 0, 18, 20, S. Row 2: 14, 18, 350.

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

[X] Other POURED & TAMPED

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, Thrd. Row 1: [X], [X], 14, [X], 2, 163, .250, [X], [X], [X], [X].

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

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type Material

Table with columns: Perf/ Screen, Casing/ Liner, 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

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Table with 4 columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 800, , 350, 1.

Temperature 60 °F Lab analysis [] Yes By

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

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

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 26.00 S N/S Range 30.00 E E/W WM
Sec 17 NE 1/4 of the NE 1/4 Tax Lot 5100
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [] Nearest address

55055 DOUBLE O RD
BURNS, OR. 97720

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), +, SWL(ft). Row 1: Existing Well / Pre-Alteration, , , . Row 2: Completed Well, 8/28/2013, , 92.

WATER BEARING ZONES Depth water was first found 92.00

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), +, SWL(ft). Row 1: 8/28/2013, 92, 343, 800, , 92.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Rows: topsoil sandy loam (0-2), clay (2-32), cinders black (32-75), clay grey (75-100), clay sand black (100-120), cinders sand (120-130), cinders multicolored (130-277), claystone brown (277-307), claystone black (307-343), clay black (343-350).

RECEIVED BY OWRD

JAN 19 2017

SALEM, OR

Date Started 8/24/2013 Complete 8/28/2013

(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.

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. 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 1424 Date 9/12/2013

Signed TIMOTHY K RILEY (E-filed)

Contact Info (optional)