HARN 52053 Page 1 of 1 WELL I.D. LABEL# L 113537 STATE OF OREGON START CARD # 1023003 WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) ORIGINAL LOG # (1) LAND OWNER Owner Well I.D. First Name GARY Last Name MILLER (9) LOCATION OF WELL (legal description) Company DOULBE OO RANCH County HARNEY Twp 33.00 S N/S Range 29.00 E E/W WM Address 33123 ROCK CREEK LANE Sec 13 NW 1/4 of the SE 1/4 Tax Lot 300 City FRENCHGLEN State OR Zip 97736 Tax Map Number X New Well Deepening Conversion (2) TYPE OF WORK DMS or DD " or 42.71215000 Alteration (complete 2a & 10) Abandonment(complete 5a) " or -119.25662200 DMS or DD (2a) PRE-ALTERATION C Street address of well Nearest address Gauge Stl Plstc Wld Thrd Casing: 33123 ROCK CREEK LANE, FRENCHGLEN OR 97736 From Amt sacks/lbs Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD SWL(psi) SWL(ft) X Rotary Air Rotary Mud Cable Auger Existing Well / Pre-Alteration Reverse Rotary Other Completed Well 5/11/2014 Flowing Artesian? (4) PROPOSED USE Domestic X Irrigation Industrial/ Commericial Livestock Dewatering WATER BEARING ZONES Depth water was first found 97.00 Thermal Injection Other SWL Date To Est Flow SWL(psi) + SWL(ft) From (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 5/9/2014 315 Depth of Completed Well 315.00 ft. BORE HOLE SEAL sacks/ Dia From To To Material From Amt lbs 19 Bentonite 19 32 Calculated 17.08 14 19 315 (11) WELL LOG Calculated Ground Elevation Method A B C From To Material X Other POURED FROM SURFAC brown sand 2 Backfill placed from _ _ ft. to ____ ft. Material brown clay 9 11 red rock Filter pack from ___ ft. Material 97 black rock 11 Explosives used: Yes Type_ Amount fractured rock black 97 315 (5a) ABANDONMENT USING UNHYDRATED BENTONITE Proposed Amount Actual Amount (6) CASING/LINER Casing Liner From Gauge Plstc Wld Thrd × X 14 19 .250 Inside Outside Other Location of shoe(s) Temp casing Yes Dia From + (7) PERFORATIONS/SCREENS Perforations Method Screens Type Material Date Started 5/7/2014 Completed <u>5/11/2014</u> Perf/ Casing/ Screen # of Tele/ Scrn/slot Slot (unbonded) Water Well Constructor Certification Screen Liner From width length slots pipe size 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 1896 Date 7/11/2019 (8) WELL TESTS: Minimum testing time is 1 hour TONY HACKETT (E-filed) Flowing Artesian O Pump O Bailer Air Drill stem/Pump depth (bonded) Water Well Constructor Certification Duration (hr) Yield gal/min 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. °F Lab analysis Yes By. Temperature 54 Yes (describe below) TDS amount License Number 1899 Date 7/11/2019 Water quality concerns? Amount Units rom Description Signed SAM KINGREY (E-filed)

Contact Info (optional)