

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

4/9/2015

WELL I.D. LABEL# L

115044

START CARD #

1025857

ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name BILL Last Name PEILA
Company
Address PO BOX 723
City HINES State OR Zip 97738

(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, 25, 42, S. Row 2: 14, 18, 155, Calculated. Row 3: 12, 155, 350, 16.74, Calculated.

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

[X] Other POURED AND 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: 12, 2, 175, .250, [X]. Row 2: 14, 1.5, 155, .250, [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, Scrm/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). Row 1: 800, 350, 1.

Temperature 57 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below) TDS amount 210

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

(9) LOCATION OF WELL (legal description)

County HARNEY Twp 26.00 S N/S Range 29.00 E E/W WM
Sec 18 SE 1/4 of the NE 1/4 Tax Lot 1800
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [] Nearest address

60077 "OO" ROAD

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), +, SWL(ft). Row 1: Existing Well / Pre-Alteration Completed Well, 4/6/2015, 10.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 10.00

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

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), +, SWL(ft). Row 1: 4/6/2015, 10, 350, 800, 10.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Rows include TOPSOIL - CLAY LOAM, CLAY - BROWN, CLAY - GRAY, SAND - MEDIUM BLACK, GRAVEL - MEDIUM, SAND - FINE BLACK, Claystone - Gray, CLAYSTONE/SAND FINE/, SAND - FINE BLACK, CLAYSTONE, SANDSTONE - GRAY BLUE, SANDSTONE - GRAY - HARD, CLAYSTONE - GREEN, SANDSTONE - GRAY BLUE.

Date Started 3/25/2015 Completed 4/6/2015

(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 SALEM, OR

(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 4/9/2015

Signed TIMOTHY K RILEY (E-filed)

Contact Info (optional) Tim Riley 541-573-5695