

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

4/27/2016

WELL I.D. LABEL# 13800
START CARD # 1030361
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D.
First Name Last Name
Company SECOND OREGON RANCH
Address PO BOX 883
City CRANE State OR Zip 97732

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

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thrld
Seal: Bentonite Chips 0 90 71 Sacks

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

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

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 710.00 ft.
Special Standard (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Rows include Bentonite Chips and Calculated values.

How was seal placed: Method A B C D E
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
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld
Shoe Inside Outside Other Location of shoe(s)
Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Perf/ Casing/Screen Screen 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 Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature 59 F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 24.00 S N/S Range 33.00 E E/W WM
Sec 14 SE 1/4 of the NW 1/4 Tax Lot 300
Tax Map Number Lot
Lat or DMS or DD
Long or DMS or DD
Street address of well Nearest address
67114 QUINCY ROAD
BURNS, OR

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration 4/25/2016 40
Completed Well 4/26/2016 48
Flowing Artesian? Dry Hole?

Table for WATER BEARING ZONES with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row 1: 4/26/2016, 48, 710, 800, 48.

(11) WELL LOG
Ground Elevation
Material From To
Existing 0 577
SANDSTONE - GRAY HARD 577 587
CLAY - GREEN HARD 587 685
CLAY - GRAY HARD 685 710
RECEIVED BY OWRD
MAY 26 2016
SALEM, OR

This report was originally e-filed to the Department; the original e-filed document is attached.

Date Started 4/25/2016 Completed 4/26/2016

(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 4/27/2016
Signed TIMOTHY K RILEY (E-filed)
Contact Info (optional) TIM RILEY 541-573-5695