

STATE OF OREGON WATER SUPPLY WELL REPORT

HARN 53141

WELL I.D. LABEL# L 149526
START CARD # 1061405
ORIGINAL LOG #

3/19/2024

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

(1) LAND OWNER
Owner Well I.D.
First Name JEFF Last Name HUSSEY
Company OTIS CREEK RANCH
Address PO BOX 224
City DREWSEY State OR Zip 97904

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

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing:
Material From To Amt sacks/lbs
Seal:

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

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

(5) BORE HOLE CONSTRUCTION
Special Standard [X] (Attach copy)
Depth of Completed Well 845.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, sacks/lbs. Rows include Bentonite and Cement.

Seal placement method [] A [] B [X] C [] D [] E [X] Other: POURED AND TAGGED
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Type Amount
Seal Placement Begin Date 6/10/2023 Begin Time 08:00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
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 [X] Flowing Artesian []
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature 65 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount 405 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County HARNEY Twp 19.00 S N/S Range 36.00 E E/W WM
Sec 31 NW 1/4 of the NW 1/4 Tax Lot 300
Tax Map Number Lot
Lat " or 43.87971200 DMS or DD
Long " or -118.34586300 DMS or DD
Street address of well [] Nearest address [X]

81850 OTIS VALLEY ROAD, DREWSEY, OR : 1/1/2 MILES EAST OFF OTIS VALLEY RD ON ALTNOW B

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 2/28/2024 [X] 1
Flowing Artesian? [X] Dry Hole? []

WATER BEARING ZONES
Depth water was first found 17.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
6/10/2023 17 35 5 10
6/11/2023 171 192 4 10
6/15/2023 610 845 400 [X] 1

(11) WELL LOG
Ground Elevation
Material From To
Brown Dirt 0 5
Tan Clay 5 17
Soft Green Clay w/Cracks WB 17 35
Soft Tan Clay 35 51
Hard Tan Clay 51 79
Hard Green Clay 79 112
Soft Tan Clay 112 171
Hard Brown Clay w/seams tan WB 171 192
Medium Hard Tan Clay 192 278
Soft Green Clay 278 390
Hard Green Clay w/Strips brown 390 420
Green Clay Hard Strips Brown 420 500
Soft Brown Clay w/Strips Green 500 515
Hard Strips in Green Clay 515 535
Soft Green Clay 535 590
Hard Green Strips Clay 590 605
Hard Brown Clay Bouncey 605 610
Black Fractured Rock Bouncey 610 665
Black,Red, White Fractured Rock traces 665 750

Construction
Begin Date 6/6/2023 Begin Time 14:00 End Date 2/28/2024

(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 1896 Date 3/15/2024
Signed TONY HACKETT (E-filed)

(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 1899 Date 3/19/2024
Signed SAM KINGREY (E-filed)
Contact Info (optional)

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

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Map of Hole

