

STATE OF OREGON
WATER SUPPLY WELL REPORT

HARN 53303

WELL I.D. LABEL# L

160634

START CARD #

1083223

ORIGINAL LOG #

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

9/4/2026

(1) LAND OWNER

Owner Well I.D. _____

First Name FREDLast Name OTLEY

Company _____

Address HC 72 BOX 30City DIAMONDState ORZip 97722**(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 Thrd

Material From To Amt sacks/lbs

Seal:

(3) DRILL METHOD☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger☐ Reverse Rotary ☐ Other _____**(4) PROPOSED USE**☐ Domestic ☐ Irrigation ☐ Community☐ Industrial/ Commercial ☒ Livestock ☐ Dewatering☐ Thermal ☐ Injection ☐ Other _____**(5) BORE HOLE CONSTRUCTION**Special Standard ☐ (Attach copy)Depth of Completed Well 360.00 ft.

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amt	sacks/lbs
12	0	280	Cement	0	280	79	S
8	280	360			Calculated	7268	
					Calculated		

Seal placement method: ☐ A ☐ B ☒ C ☐ D ☐ E ☐ Other: _____

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____Seal Placement Begin Date 8/25/2026 Begin Time 12 00**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount _____

Actual Amount _____

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	8	☒	2	283	0.250	ST	☒		OTH.	283
L	6		260	360	0.250	ST	☒			

Temp casing ☐ Yes Dia _____ From + ☐ _____ To _____**(7) PERFORATIONS/SCREENS**

Perforations Method _____

Screens Type perforated Material steel

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size
		6	300	360	.25	4	928	Pipe Size

(8) WELL TESTS: Minimum testing time is 1 hour

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	100		360	2

Temperature 54 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 261 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County HARNEY Twp 30.00 S N/S Range 33.00 E E/W WMSec 35 NW 1/4 of the NE 1/4 Tax Lot 1600

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 42.92598800 DMS or DD

Long _____ ° _____ ' _____ " or -118.61214000 DMS or DD

☐ Street address of well ☒ Nearest address

APPROX 5 MILES SOUTH OF DIAMOND LANE ON DIAMOND GRAIN CAMP ROAD

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	8/26/2026			53
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 38.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
8/18/2026	38	196	15			39
8/21/2026	196	360	100			53

(11) WELL LOGGround Elevation 4865.48 FT

Material	From	To
top soil w/cobbles	0	2
brown clay	2	7
brown clay w/course sand	7	12
pink broken rock	12	16
grey w/red broken rock	16	28
brown broken rock	28	38
pourous green fractured rock	38	57
hard green fractured rock	57	77
grey & brown rock w/orange clay	77	103
brown rock w/orange clay	103	117
grey blue rock fractured	117	124
blue rock w/pumice sand	124	137
brown clay	137	145
brown sandstone w/cracks	145	196
white pumice	196	206
brown clay	206	211
grey pumice	211	224
brown sandstone w/pumice	224	247
pumice w/orange	247	260

Construction

Begin Date 8/13/2026 Begin Time 08 18 End Date 8/26/2026**(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 1896 Date 9/4/2026Signed TONY HACKETT (E-filed)Drilling Company: Down Right Drilling & Pump

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

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

HARN 53303

9/4/2026

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 42.92598800 Datum: WGS84

Longitude: -118.61214000

Township/Range/Section/Quarter-Quarter Section:

WM30.00S33.00E35NWNE

Address of Well:

APPROX 5 MILES SOUTH OF DIAMOND LANE ON DIAMOND GRAY CAMP ROAD

Well Label: 160634

Printed: September 4, 2026

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

