

HOOD 50840

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

HOOD 50840

10/14/2013

WELL I.D. LABEL# L 104734
START CARD # 206790
ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. _____
First Name DAVID NUNN Last Name _____
Company NUNN HOLDING CO LLC
Address 108 HWY 35
City HOOD RIVER State OR Zip 97031

(2) TYPE OF WORK New Well 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 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 Special Standard (Attach copy)
Depth of Completed Well 250.00 ft.

BORE HOLE			SEAL		
Dia	From	To	Material	From	To
10	0	20	Bentonite	0	20
6	20	250		14	45
				S	

How was seal placed: Method A B C D E
 Other POUR IN
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 Thrd

6	10	20	19	.250
4.5				

Shoe Inside Outside Other Location of shoe(s) 20
Temp casing Yes Dia 10 From 0 To 5

(7) PERFORATIONS/SCREENS
Perforations Method SAW
Screens Type _____ Material _____
Perf/ Casing/ Screen Screen/slot width Slot length # of slots Tele/ Screen Liner Dia From To width length pipe size

Perf	Liner	4.5	210	250	.13	.6	40	

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
 45 240 1

Temperature 60 °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 HOOD RIVER Twp 3.00 N N/S Range 10.00 E E/W WM
Sec 25 SE 1/4 of the SE 1/4 Tax Lot 902
Tax Map Number _____ Lot _____
Lat _____ ° _____ ' _____ " or _____ DMS or DD
Long _____ ° _____ ' _____ " or _____ DMS or DD
 Street address of well 108 HWY 35 HOOD RIVER OR
 Nearest address

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	10/8/2013			75

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found 218.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)

10/8/2013	218	250	45		75

(11) WELL LOG Ground Elevation

Material	From	To
TOPSOIL	0	1
BROWN CLAY W/FRACTURE	1	4
GRAY BASALT, MEDIUM HARD	4	26
BLACK BASALT, MEDIUM	26	81
GRAY & BLACK BASALT, MEDIUM	81	144
GRAY BASALT, HARD	144	218
BLACK & GRAY BASALT, W/BLUE SEAMS	218	250
WATERBEARING	218	250

RECEIVED BY OWRD

OCT 31 2013

SALEM, OR
Date Started 10/7/2013 Complete 10/8/2013

(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 1256 Date 10/9/2013

Signed KARL F MOORE JR (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 731 Date 10/14/2013

Signed CHARLES MOORE (E-filed)

Contact Info (optional) CHARLES L MOORE