

11/13/2023

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

(1) LAND OWNER
Owner Well I.D. _____
First Name _____ Last Name _____
Company LOST LAKE RESORT
Address 9000 LOST LAKE RD
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 584.00 ft.
BORE HOLE
Dia From To Material SEAL Amt sacks/lbs
10 0 19 Bentonite Chips 0 19 25 S
6 19 585 Calculated 25
Calculated

Seal placement method A B C D E Other: POURED
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Type _____ Amount _____
Seal Placement Begin Date 10/17/2023 Begin Time 11:00

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

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
 6 4 22 .250
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 Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots 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)
20 _____ 580 3
Temperature 57 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 35 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County HOOD RIVER Twp 1.00 S N/S Range 8.00 E E/W WM
Sec 10 NW 1/4 of the SW 1/4 Tax Lot 100
Tax Map Number _____ Lot _____
Lat _____ " or 45.49610000 DMS or DD
Long _____ " or -121.81812000 DMS or DD
 Street address of well Nearest address
9000 LOST LAKE RD, HOOD RIVER, OR 97031

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration _____
Completed Well 11/7/2023 5
Flowing Artesian? Dry Hole?
WATER BEARING ZONES Depth water was first found 12
SWL Date From To Est Flow SWL(psi) + SWL(ft)
11/6/2023 540 585 20 5

(11) WELL LOG Ground Elevation _____
Material From To
Fill Gravel 0 1
Broken Brown Basalt with Clay 1 10
Brown San and Gravel with Boulders 10 21
Gray Basalt Hard 21 54
Brown Basalt Broken 54 91
Gray Basalt Hard 91 157
Brown Basalt Broken med/soft 157 234
Gray Basalt 234 307
Brown Basalt med 307 421
Black Basalt hard 421 477
Brown Basalt soft 477 492
Black Basalt hard 492 585
Construction Begin Date 10/17/2023 Begin Time 08:00 End Date 11/7/2023

(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 _____

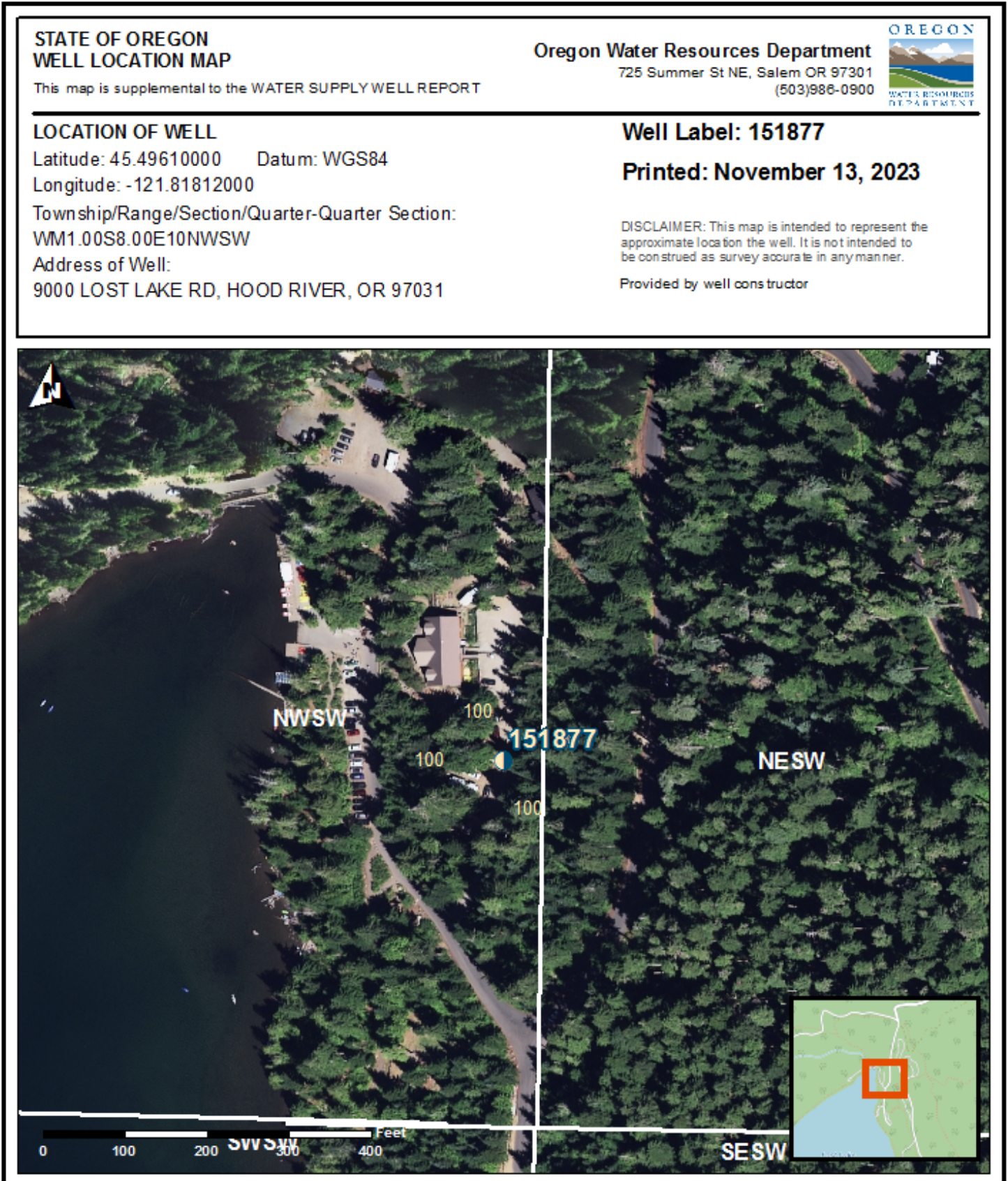
(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.
License Number 2053 Date 11/13/2023
Signed MATT GOLEC (E-filed)
Contact Info (optional) Matt Golec

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

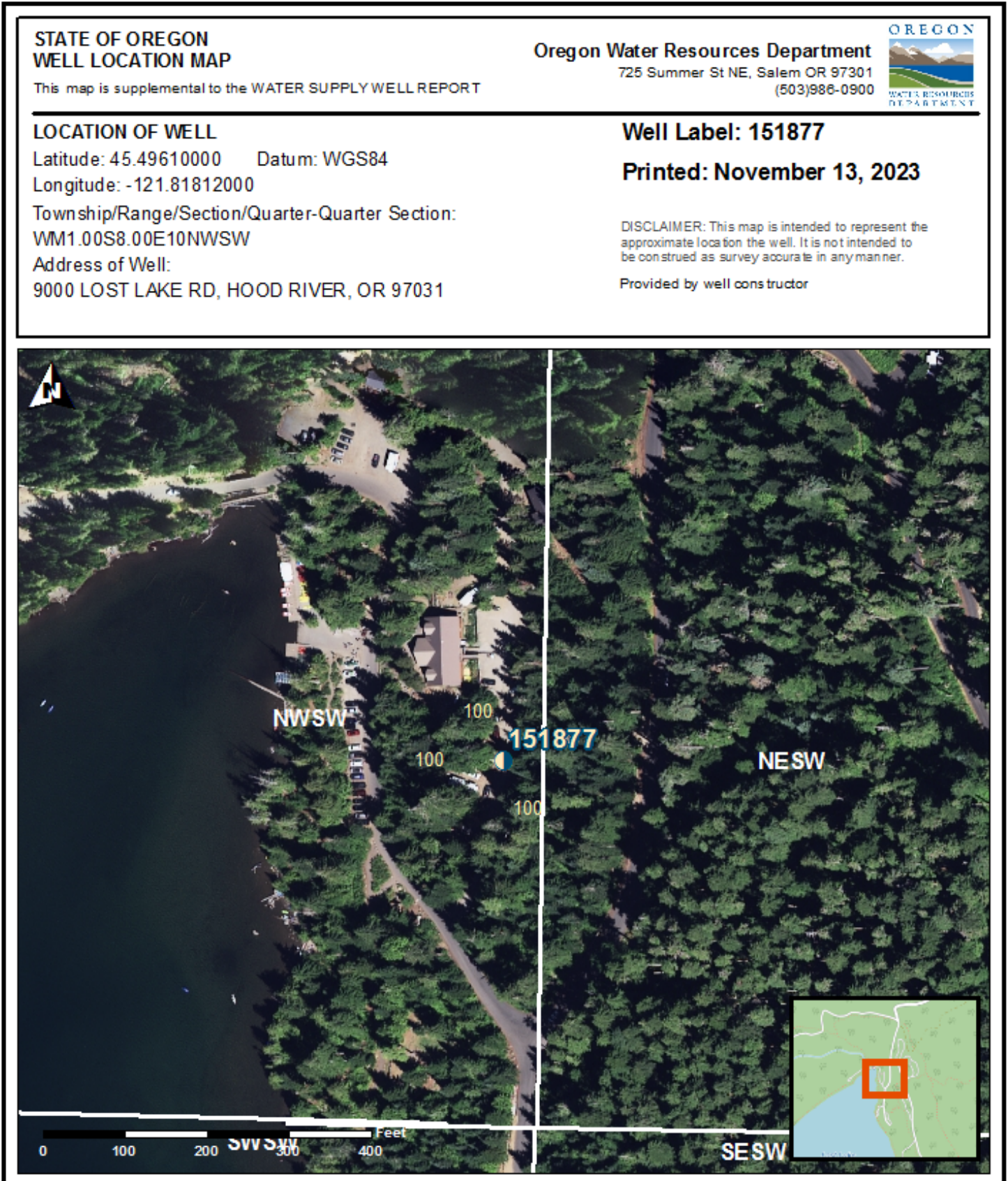
HOOD 51295

11/13/2023

Map of Hole



Map of Hole



Map of Hole

<p>STATE OF OREGON WELL LOCATION MAP</p>	<p>Oregon Water Resources Department 725 Summer St NE, Salem OR 97301 (503)986-0900</p>	 <p>OREGON WATER RESOURCES DEPARTMENT</p>
<p>This map is supplemental to the WATER SUPPLY WELL REPORT</p>		
<p>LOCATION OF WELL</p>	<p>Well Label: 151877</p>	
<p>Latitude: 45.49610000 Datum: WGS84</p>	<p>Printed: November 13, 2023</p>	
<p>Longitude: -121.81812000</p>	<p>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.</p>	
<p>Township/Range/Section/Quarter-Quarter Section:</p>	<p>Provided by well constructor</p>	
<p>WM1.00S8.00E10NWSW</p>		
<p>Address of Well:</p>		
<p>9000 LOST LAKE RD, HOOD RIVER, OR 97031</p>		

