						<i>щ</i> т [		Pa	ige 1 of 2
STATE OF OREGON	JACK	634	34		I.D. LABEI		86		
WATER SUPPLY WELL REPORT							060		
(as required by ORS 537.765 & OAR 690-205-0210)		6/11/20	18	ORIG	INAL LOG	#			
(1) LAND OWNER Owner Well I.D.									
First Name STEVE Last Name TAYLOR		· ·							
Company STEVE TAYLOR REAL ESTATE INVESTMENTS			9) LOCATI				-		
Address 1766 PARTRICK RD		- C	ounty JACKSON	Twp_	38.00 S	N/S F	Range 1.00	W	E/W WM
City NAMPA State CA Zip 94	558 6182	- Se	ec <u>9 N</u>	W 1/4 d	of the NE	1/4	Tax Lot 30	00	
City NAMIPA State CA Zip 94.		=   <sub>Ta</sub>	x Map Number	r			Lot		
(2) TYPE OF WORK X <sup>New Well</sup> Deepening	Conversio	on I	ax Map Number at° ong°	,	" or 42.28661	039	· · · ·	DM	S or DD
Alteration (complete 2a & 10) Aband	onment(comple	ete 5a)			" or 122 822	204401		DM	S or DD
(2a) PRE-ALTERATION			ong		01 -122.823	04491	11	DM	S OF DD
Dia + From To Gauge Stl Plstc W	ld Thrd		$\sim$		well C				
Casing:		9	3 NORTHRIDO	GE TERRAC	E, PHOEND	K, OREGC	ON 97535		
Material From To Amt sacks/lbs									
Seal:									,
(3) DRILL METHOD			0) STATIC	WATER					
X Rotary Air Rotary Mud Cable Auger Ca					Date SV	WL(psi) +	SWI	_(ft)	
Reverse Rotary Other			Existing Wel	F7 11				ļ	
			Completed V					1	2
(4) PROPOSED USE  Domestic  Irrigation  Community				Flowin	g Artesian?	Dr	y Hole?		
Industrial/ Commericial Livestock Dewatering	W	ATER BEARIN	IG ZONES	Depth	ı water wa	s first found	135.00		
Thermal Injection Other			SWL Date	From	-		SWL(psi)		
			5 WE Dute	TIOIII	10	LSt 110W	5 W L(psi)	- 30	L(II)
	dard 🗙 (Attac	ch copy)	6/8/2018	135	200	3		×	
Depth of Completed Well 300.00 ft.									
BORE HOLE SEAL		sacks/							
Dia From To Material From	To Amt	lbs							
10 0 58.5 Cement 0	58 22	S							
6 58.5 300 Cal	culated 15.75								
			1) WELL L						
Cal		Ground Elevation							
<u>How was seal placed:</u> Method $\square A \square B \times C$				Material			From	То	
Other		b	ack fill, 4' rock	fill			0	1	0
Other ft. to ft. Material		C	Clay, Dark 10					1	5
Filter pack from ft. to ft. Material Size			Clay with gravel and flat river rock 15					3	4
			Claystone, Grey				34	13	35
Explosives used: Yes Type Amount		S	andstone, Blue/	Grey			135	30	00
(5a) ABANDONMENT USING UNHYDRATED BE	NTONITE								
Proposed Amount Actual Amount									
(6) CASING/LINER Casing Liner Dia + From To Gauge S	tl Plstc Wld	Thed							
$ \bigcirc \bigcirc \bigcirc 6 \\ \hline 4 \\ \hline 0 \\ \hline 300 \\ \ sch 40 \\ \hline \bigcirc \bigcirc \checkmark \\ \hline \\$									
								_	
								_	
Shoe Inside Other Location of shoe(s) 58.5								_	
	shoe(s) $58.5$							_	
Temp casing Yes Dia From +	То							_	
(7) PERFORATIONS/SCREENS		— ⊩						_	
Perforations Method factory cut									
Screens Type Material _			ate Started6/	/5/2018	C	mnlata	1 6/8/2018		
Perf/ Casing/ Screen Scrn/slot Slot	Tele/	Date Started <u>6/5/2018</u> Completed <u>6/8/2018</u>							
Screen Liner Dia From To width lengt		inbonded) Wa	ter Well Co	nstructor Ce	rtification	L			
Perf Liner 4 260 300 .032 2	<u>h slots pip</u> 6400	4 I	certify that the	work I per	formed on the	e construc	tion, deepen	ing, alter	ration, or
			bandonment of						
			onstruction star			d informat	ion reported	above a	re true to
		tł	ne best of my kr	nowledge and	l belief.				
		L	icense Number			Date			
(8) WELL TESTS: Minimum testing time is 1 hour						_			
		S	igned						
Pump Bailer Air	Flowing Artesia	an							
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)			onded) Water	Well Const	ructor Certif	ication			
3 299	I	accept responsi	ibility for th	e construction	n, deepeni	ng, alteration	n, or aba	Indonmen	
			ork performed						
		p	erformed durin	g this time	is in compl	iance with	n Oregon w	ater su	pply wel
Temperature 61 °F Lab analysis Yes By		co	onstruction stan	dards. This i	eport is true t	o the best	of my knowl	edge an	d belief.
			icense Number	1709		Date 6/1	1/2019		
Water quality concerns?Yes (describe below) TDS amount 240 ppm From ToDescription Amount Units				1/70		0/1	1/2010		
		s	igned GARY	Y NEWMAN	(E-filed)				
			ontact Info (opt		· /	Vell Drillin	ng Inc. 541-7	72-1177	
			into (opt					1	
OBICINAL	ATED DESOLU	DCES DED	DTMENT						

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

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



6/11/2018

Map of Hole

## STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

## LOCATION OF WELL

Latitude: 42.2866103896 Datum: WGS84 Longitude: -122.82304490966 Township/Range/Section/Quarter-Quarter Section: WM 38S 1W 9 NWNE Address of Well: 93 NORTHRIDGE TERRACE, PHOENIX, OREGON 97535

## Oregon Water Resources Department 725 Summer St NE, Salem OR 97301 (503)986-0900



Well Label: 128486

## Printed: June 9, 2018

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

