

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

09-28-2008

WELL LABEL # L 96130

START CARD # 1004680

(1) LAND OWNER Owner Well I.D. _____

First Name _____ Last Name _____
Company LAKE CREEK LODGE
Address 13375 SW FOREST SERVICE RD #1419
City CAMP SHERMAN State OR Zip 97730

(2) TYPE OF WORK [X] New Well [] Deepening [] Conversion
[] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD

[X] Rotary Air [] 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 [] (Attach copy)

Depth of Completed Well 92.00 ft.

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

How was seal placed: Method [] A [] B [X] C [] D [] E

[X] Other Poured Dry

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

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

Explosives used: [] Yes Type _____ Amount _____

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes a row with values 8, 1.5, 91.5, .250.

Shoe [] Inside [] Outside [] Other Location of shoe(s) _____

Temp casing [] Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method Air Perf
Screens Type _____ Material _____

Table with columns: Perf/S creen, Casing/ Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Includes a row with values 8, 75, 88, .125, 2, 450.

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Table with 4 columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Includes a row with values 75, 85, 1.

Temperature 49 °F Lab analysis [] Yes By _____

Water quality concerns? [] Yes (describe below)

Table with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)

County Jefferson Twp 13.00 S N/S Range 9.00 E E/W WM
Sec 15 NW 1/4 of the NW 1/4 Tax Lot 301
Tax Map Number _____ Lot _____
Lat _____ " or 44.44356000 DMS or DD
Long _____ " or -121.65267000 DMS or DD
[] Street address of well [X] Nearest address

13375 SW FOREST SERVICE RD #1419

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Includes rows for Existing Well / Predeepening and Completed Well (09-26-2008, 7).

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 15

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Includes rows for 09-22-2008 and 09-23-2008.

(11) WELL LOG

Ground Elevation _____

Table with columns: Material, From, To. Includes rows for Loam Brown, Gravels Gray, Clay Gravels Brown, Sand Gray, Gravels Sand Gray, Lava Gray.

Date Started 09-22-2008 Completed 09-26-2008

(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 758 Date 09-28-2008

Electronically Filed

Signed THOMAS R PECK (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 1720 Date 09-28-2008

Electronically Filed

Signed JACK ABBAS (E-filed)

Contact Info (optional)