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STATE OF OREGON	KLAM	59869	WELL I.D. LABEL# I	126387		
WATER SUPPLY WELL REPORT	0.00.0		START CARD #	1036120		
(as required by ORS 537.765 & OAR 690-205-0210)	9/28/2	2017	ORIGINAL LOG #			
(1) LAND OWNER Owner Well I.D. First Name JAMES & JANET Last Name HAYDN-MYER						
		(9) LOCA	TION OF WELL (legal d	lescription)		
Company Address 10807 WARNERVILLE RD.			MATH Twp <u>36.00</u> S N			
		Sec <u>4</u>	SW 1/4 of the SE	1/4 Tax Lot <u>14</u>	00	
City OAKDALE State CA Zip 95361 (2) TYPE OF WORK X New Well Deepening Conv	ersion	Tax Map Nur	nber' or'	Lot		
Alteration (complete 2a & 10) Abandonment(co	omplete 5a)	Lat	°' or		DMS or DD	
(2a) PRE-ALTERATION	<u>, , , , , , , , , , , , , , , , , , , </u>	Long	°" or		_ DMS or DD	
Dia + From To Gauge Stl Plstc Wld Thrd		\bullet	Street address of well ONe	arest address		
		40610 DRE				
Material From To Amt sacks/lbs Seal:		BEATTY, O	NK.			
(3) DRILL METHOD		(10) STAT	TIC WATER LEVEL			
Image: Strain			Date	SWL(psi) +	SWL(ft)	
Reverse Rotary Other			Well / Pre-Alteration			
		Complete	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		32.3	
(4) PROPOSED USE Domestic Irrigation Community			Flowing Artesian?	-		
Industrial/ Commericial Livestock Dewatering		WATER BEA	RING ZONES Depth wa	ater was first found	205.00	
ThermalInjectionOther		SWL Date	From To Est	Flow SWL(psi)	+ SWL(ft)	
(5) BORE HOLE CONSTRUCTION Special Standard (A	Attach copy)	9/28/2017	205 665 1	1000 14	× 32.3	
Depth of Completed Well <u>665.00</u> ft.						
BORE HOLE SEAL	sacks/					
	mt lbs					
	232 S 225					
12 274 665 Calculated 2						
Calculated		(11) WELI	LOG Ground Elevatio	n		
How was seal placed: Method A B K C D	Е		Material	From	То	
Other		soft brown cl	aystone	0	20	
Backfill placed from ft. to ft. Material		hard grey cla	•	20	155	
Filter pack from ft. to ft. Material Size		black sandsto		155	175	
Explosives used: Yes Type Amount		hard grey cla		175	205	
(5a) ABANDONMENT USING UNHYDRATED BENTONI		white pumice soft green cla		205	260 305	
Proposed Amount Actual Amount		<u> </u>	y / pumice seams/sand/lava	305	665	
1			-			
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc	Wld Thrd					
$\bullet \qquad 16 \qquad \boxed{2} \qquad 234 \qquad .250 \qquad \boxed{\bullet} \qquad \bigcirc$	\mathbf{X} \Box					
Shoe Inside Outside Other Location of shoe(s)						
Temp casing Yes Dia From + To						
(7) PERFORATIONS/SCREENS						
Perforations Method	_				11	
Screens Type Material Perf/ Casing/Screen Scrn/slot Slot # of	Tele/	Date Starte	cd9/6/2017 Com	pleted <u>9/28/2017</u>		
0	pipe size	(unbonded)	Water Well Constructor Certifi	ication		
Scient Enci Dia Tioni To widin lengin siots		. ,	the work I performed on the co		ng, alteration, or	
			t of this well is in compliance			
			standards. Materials used and in	formation reported	above are true to	
			y knowledge and belief.			
		License Nun	ber <u>1739</u> Da	ate <u>9/28/2017</u>		
(8) WELL TESTS: Minimum testing time is 1 hour		Signed CI	HARIES MERV (E-filed)			
$\bigcirc Pump \qquad \bigcirc Bailer \qquad \bigcirc Air \qquad \bigodot Flowing Artesian$						
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)		(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			
			uring this time is in complianc standards. This report is true to th	he best of my knowle	edge and belief	
Temperature 43 °F Lab analysis Yes By			construction standards. This report is true to the best of my knowledge and belief.License Number 1355Date 9/28/2017			
Water quality concerns? Yes (describe below) TDS amount 55 ppm From To Description			ber <u>1355</u> Da	ate 9/28/2017		
		Signed AF	RTHUR L FRY (E-filed)			
			(optional)			

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