

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

08-16-2008

WELL LABEL # L

[Empty box for Well Label #]

START CARD #

1003220

(1) LAND OWNER

Owner Well I.D. Old Well #4

First Name Last Name Company TOWN OF LAKEVIEW Address 525 NORTH FIRST STREET City LAKEVIEW State OR Zip 97630

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

Depth of Completed Well ft.

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, sacks/lbs

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

[] Other

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

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

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type Material

Perf/S Casing/ Screen

Table with columns: green, Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size

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

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

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr)

Temperature °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 Lake Twp 39.00 S N/S Range 20.00 E E/W WM Sec 16 SW 1/4 of the NW 1/4 Tax Lot 2600 Tax Map Number Lot Lat Long DMS or DD

END OF NORTH SECOND STREET LAKEVIEW, OREGON 97630

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft), Existing Well / Predeepening, Completed Well, Flowing Artesian?, Dry Hole?

WATER BEARING ZONES Depth water was first found

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft)

(11) WELL LOG

Table with columns: Material, From, To, Ground Elevation

Date Started 04-08-2008 Completed 08-06-2008

(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 Date Electronically Filed 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 1385 Date 08-16-2008 Electronically Filed Signed ROBERT BUCKNER (E-filed) Contact Info (optional)

