~~Amended~~

Well #8

LAKE 52487

LAKE 52487 LOST! Repl: 159223

STATE OF OREGON
WATER SUPPLY WELL REPORT
(ORS 537.765 & OAR 690-205-0210)
Instructions for completing this report are on the last page of this form.

WELL LABEL # L ~~104458~~ 159223
START CARD # 206041
ORIGINAL LOG #

(1) LANDOWNER Owner Well I.D. _____
First Name Thomas Last Name MacDaniel
Company _____
Address PO Box 5-1
City Summer Lake State OR Zip 97640

(2) TYPE OF WORK ☒ New ☐ Conversion ☐ Deepening
☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth _____ ft.
Seal Material _____
Casing Type: ☐ Steel ☐ Plastic ☐ Other _____
Casing Gauge _____ Casing Diameter _____

(3) DRILL METHOD ☒ Rotary Air ☐ Rotary Mud ☐ Auger
☐ Cable ☐ Cable Mud ☐ Reverse Rotary ☐ Other _____

(4) PROPOSED USE ☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection
☐ Thermal ☐ Other _____

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 260 ft. Special Standard: ☐ Yes (attach copy)

BORE HOLE Dia	From	To	Material	SEAL From	To	Amount	Sacks/lbs
24"	0	90	Cement	0	90	100	Sx
18"	90	155	Cement	90	155	100	Sx
14"	155	200					
10"	200	260					

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 _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: _____ sacks/lbs
Actual Amount Used: _____ sacks/lbs

(6) CASING/LINER

Csng	Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		18"	+	1	90	.250	X		X	
X		14"	+	1	155	.250	X		X	

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____
Temporary casing ☐ Yes Diameter _____ From _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____

Perf	Scrn	Csng	Linr	Screen Dia	From	To	Screen/ slot width	Slot length	# of slots	Tele/ 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)
1500			hr 1

Temperature 60° °F Lab analysis ☐ Yes By _____
Water quality concerns? ☐ Yes (describe below) TDS _____ ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County Lake Twp 30 N or S Range 17 E or W W.M.
Sec 15 ~~NE~~ NW¼ of the ~~SW~~ SE¼ Tax Lot 600
Tax Map Number _____ Lot _____
Lat _____ ° _____ ' _____ " or _____ DMS or DD
Long _____ ° _____ ' _____ " or _____ DMS or DD
Street Address of Well (or nearest address) 48413 Dyssel Spring Rd Summer Lake

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL (ft)
Existing Well/Pre-Alteration	9-1-13	4 psi		
Completed Well				

Flowing Artesian? ☒ Yes Dry Hole? ☐ Yes

WATER BEARING ZONES Depth water was first found 260'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
9-1-13	220	260	1500	4 psi		

(11) WELL LOG Ground Elevation _____

Material	From	To
Top Soil	0	2
Brown clay	2	150
Black Lava Rock	150	165
Red Lava Rock	165	220
Black Lava Rock	220	260

RECEIVED BY OWRD
NOV 18 2013
SALEM, OR
~~RECEIVED BY OWRD~~
~~OCT 10 2013~~
~~SALEM, OR~~

Date Started 8-15-13 Completed 9-1-13

(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 1651 Date 10-6-13
Signed _____
Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT ONE COPY FOR CONSTRUCTOR ONE COPY FOR CUSTOMER
SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK 01/02/2009

RECEIVED BY OWRD
APR 24 2014
SALEM, OR

LAKE 52487

LAKE 52487 LOST! Repl: 159223

STATE OF OREGON
WATER SUPPLY WELL REPORT
(ORS 537.765 & OAR 690-205-0210)
Instructions for completing this report are on the last page of this form.

WELL LABEL # L ~~104455~~
START CARD # 206041
ORIGINAL LOG #

(1) LANDOWNER Owner Well I.D.
First Name Thomas Last Name MacDonald
Company
Address PO Box 871
City Summer Lake State OR Zip 97640

(2) TYPE OF WORK ☒ New ☐ Conversion ☐ Deepening
☐ Alteration (complete Sections 2a & 10) ☐ Abandonment (complete Section 5a)

(2a) PRE-ALTERATION: Well Depth ____ ft.
Seal Material
Casing Type: ☐ Steel ☐ Plastic ☐ Other
Casing Gauge Casing Diameter

(3) DRILL METHOD ☒ Rotary Air ☐ Rotary Mud ☐ Auger
☐ Cable ☐ Cable Mud ☐ Reverse Rotary ☐ Other

(4) PROPOSED USE ☐ Domestic ☒ Irrigation ☐ Community
☐ Industrial/Commercial ☐ Livestock ☐ Dewatering ☐ Injection
☐ Thermal ☐ Other

(5) BORE HOLE CONSTRUCTION
Depth of Completed Well 260 ft. Special Standard: ☐ Yes (attach copy)

BORE HOLE Dia	From	To	Material	SEAL From	To	Amount	Sacks/lbs
24"	0	90	Cement	0	90	100	Sack
14"	90	155	Cement	90	155	100	Sack
14"	155	200					
10"	200	260					

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 ____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE:
Calculated Amount Proposed to be Used: ____ sacks/lbs
Actual Amount Used: ____ sacks/lbs

(6) CASING/LINER

Csng	Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		18"	+	1	90	.250	X		X	
X		14"	+	1	155	.250	X		X	

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)
Temporary casing ☐ Yes Diameter From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material

Perf	Scrn	Csng	Linr	Screen Dia	From	To	Screen/ slot width	Slot length	# of slots	Tele/ 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)
1500			hr!

Temperature 60' °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS ____ ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
County Lake Twp 30 N or S Range 17 E or W W.M.
Sec 35 SE 1/4 of the NE 1/4 Tax Lot 600
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
Street Address of Well (or nearest address) 48413 Dessel Spring Rd Summer Lake

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL (ft)
Existing Well/Pre-Alteration	9-1-13	4 psi		
Completed Well				

Flowing Artesian? ☒ Yes Dry Hole? ☐ Yes
WATER BEARING ZONES Depth water was first found 260'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
9-1-13	220	260	1500	4 psi		

(11) WELL LOG Ground Elevation

Material	From	To
Top Soil	0	2
Brown clay	2	150
Black Lava rock	150	165
Red Lava rock	165	220
Broken Lava rock	220	260

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NOV 18 2013
SALEM, OR
RECEIVED BY OWRD
OCT 10 2013
SALEM, OR

Date Started 8-15-13 Completed 9-1-13

(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 1654 Date 10-6-13
Signed
Contact Info. (optional)

ORIGINAL – WATER RESOURCES DEPARTMENT ONE COPY FOR CONSTRUCTOR ONE COPY FOR CUSTOMER
SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

01/02/2009

May 15th, 2014

Oregon Water Resources Department
Attn: Buffy Gillis
725 Summer Street NE, Suite A
Salem, OR 97301

Dear Ms. Gillis,

Below is a list of the correct locations of the wells therein identified. Well driller Tom Search sent your office the corrected well logs for LAKE 1507 and LAKE 52487. Schroeder Law Offices sent your office the corrected well logs for the remaining wells.

Well #	Well Log #	Township, Range, Section, Quarter-Quarter
Well 1	LAKE 3030	30 South, 17 East, Sec. 8 NE NW
Well 2	LAKE 1507	30 South, 17 East, Sec. 8 NE NW
Well 3	LAKE 4444	30 South, 17 East, Sec. 8 NE NW
Well 4	LAKE 3029	30 South, 17 East, Sec. 8 NE NW
Well 6	LAKE 52368	30 South, 17 East, Sec. 5 SW SE
Well 7	LAKE 52369	30 South, 17 East, Sec. 8 NE NW
Well 8	LAKE 52487	30 South, 17 East, Sec. 5 NW SE

Sincerely,

Thomas MacDonald
Desert Springs Trout Farm

OREGON WATER RESOURCES DEPARTMENT
Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.oregon.gov/owrd

Application for
Well ID Number

RECEIVED
AUG 21 2025
OWRD

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name *(please print)*: Western State Steelhead; Attn: Charlie Hensel
Mailing Address: 2157 N Northlake Way, Suite 210
City, State, Zip: Seattle, WA 98103

Mail Well ID to: ☐ SAME AS ABOVE ☒ In Care Of (C/O)
Name & Address: Thomas MacDonald, P.O. Box 40
City, State, Zip: Summer Lake, OR 97640

II. WELL LOCATION INFORMATION *(Please fill out as completely as possible)*

Township: 30 N (North / South) Range: 17 W (East / West) Section: 5 NW 1/4 of the SE 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 600 County Lake
GPS Coordinates: N 42.99657318, W -120.73126521
Street Address of Well, City: 48320 Desert Springs Rd, Summer Lake, OR 97640
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION *(Please fill out as completely as possible, AND attach copy of Well Report, if available)*

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Commercial / Industrial; Well 8, Permit G 18914
Date Well Constructed (or property built): 8-1-2013 Total Well Depth: 260 ft Casing Diameter: 14 in
Owner at time the well was constructed (if known): Thomas MacDonald Well Report # (if known): LAKE 52487
Other Information: Original well tag L-104458 LOST! (band broke and tag was lost) - need REPLACEMENT

SUBMITTED BY *(please print)*: Theodore R. Ressler
PHONE: 503-701-4535 **EMAIL &/or FAX:** tressler@summitwr.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301. Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

****REPLACEMENT****

For Official Use Only by the Oregon Water Resources Department:

Received Date:	Well Report Number:	Well Identification #:
8-21-2025	LAKE 52487	L-159223