**LAKE 52568** Page 1 of 1 WELL I.D. LABEL# L 116663 STATE OF OREGON START CARD # 1024305 WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) 10/1/2014 **ORIGINAL LOG#** (1) LAND OWNER Owner Well I.D. Last Name FITZGERALD First Name ELANORE (9) LOCATION OF WELL (legal description) Company FITZGERALD RANCH, INC Twp 36.00 S N/S Range 24.00 E E/W WM Address 28975 HOGBACK RD. Sec 15 SW 1/4 of the NW 1/4 Tax Lot 3100 City PLUSH State OR Zip 97637 Tax Map Number (2) TYPE OF WORK New Well Deepening Conversion DMS or DD Alteration (complete 2a & 10) Abandonment(complete 5a) \_\_\_\_ or DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address Stl Plstc Wld Thrd Casing:  $\circ$ FITZGERALD RD. PLUSH Material From To Amt sacks/lbs Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD X Rotary Air Rotary Mud Cable Auger Cable Mud SWL(psi) SWL(ft) Existing Well / Pre-Alteration Reverse Rotary Other Completed Well Domestic Irrigation Community Flowing Artesian? (4) PROPOSED USE Industrial/ Commericial Livestock Dewatering Depth water was first found 51.00 WATER BEARING ZONES Thermal Injection Other SWL Date From To Est Flow SWL(psi) + SWL(ft) (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy) 9/23/2014 1500 51 260 12.5 Depth of Completed Well 260.00 ft. **BORE HOLE** SEAL sacks/ Dia Material To From To From Amt lbs 20 0 131 Cement 50 S 0 65 12 131 260 (11) WELL LOG Ground Elevation XC How was seal placed: Method A B From Material To Other Top soil Backfill placed from \*65 ft. to 131 ft. Material GRAVEL Brown Clay 22 Grey Clay 22 51 Filter pack from \_\_\_\_ \_\_\_ ft. to \_\_\_\_ ft. Material Broken volcanic conglomerate 51 130 Explosives used: Yes Type\_\_\_ Amount Broken Basalt 130 260 (5a) ABANDONMENT USING UNHYDRATED BENTONITE Proposed Amount Actual Amount (6) CASING/LINER Dia Casing Liner From To Gauge Plstc Wld Thrd X  $\odot$ 16 131 .250  $(\bullet)$ RECEIVED BY OWRD OCT 20 2014 Other Inside Shoe Outside Location of shoe(s) Temp casing Yes Dia From \_ SALEM. OR (7) PERFORATIONS/SCREENS Perforations Method Factory Screens Type\_ Material Date Started 9/11/2014 Complete 9/23/2014 Perf/ Casing/ Screen # of Tele/ Scrn/slot Slot Screen Liner Dia To slots (unbonded) Water Well Constructor Certification From width length pipe size I certify that the work I performed on the construction, deepening, alteration, or Perf Casing 131 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 1739

Date 10/1/2014 CHARLES M FRY (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 1355		Date	10/1/2014
Signed	ARTHUR L FRY (E-filed)		
Contact In	fo (optional)		

ORIGINAL - WATER RESOURCES DEPARTMENT

Amount Units

O Flowing Artesian

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

O Bailer

Drawdown

Air

Yes (describe below) TDS amount

Description

°F Lab analysis Yes By\_

Drill stem/Pump depth Duration (hr)

O Pump

Temperature 56

Yield gal/min

Water quality concerns?

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