

LAKE 52851

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL I.D. LABEL# L 109507
START CARD # 197358
ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. _____
First Name Jesus + Jose Last Name Lopez + SoTo
Company _____
Address 216104 E SR 397
City KENNEWICK State WA Zip 99337-7199

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

(2a) PRE-ALTERATION
Dia + From To Gauge Stil Plstc Wld Thrd
Casing: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Material From To Amt sacks/lbs
Seal: ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐

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

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

(5) BORE HOLE CONSTRUCTION Special Standard ☐ (Attach copy)
Depth of Completed Well 150 ft.
BORE HOLE SEAL
Dia From To Material From To Amt sacks/lbs
10 7/8 0 50 3/8 Bentonite chips 0 50 22 SACKS
8 50 58.5 Calculated 15 1/2 SACKS
6 58.5 150 Calculated _____

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Poured dry
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: ☐ Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stil Plstc Wld Thrd
☒ ☐ 6 ☒ 1.5 58.5 150 ☒ ☐ ☐ ☐ ☐ ☐
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 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
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
30 + _____ 100' 1
Temperature 52 °F Lab analysis ☐ Yes By _____
Water quality concerns? ☐ Yes (describe below) TDS amount 269
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County LAKE Twp 27 N S Range 16 E W WM
Sec 1 NE 1/4 of the NW 1/4 Tax Lot 300
Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
☒ Street address of well ☐ Nearest address
300 CANDLESTICK Rd.
2 miles NORTH ON OIL Day Rd, EAST 1 1/2 mile

(10) STATIC WATER LEVEL
Date SWL (psi) + SWL (ft)
Existing Well / Pre-Alteration _____
Completed Well 7-30-18 32
Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 131
SWL Date From To Est Flow SWL (psi) + SWL (ft)
7-30-18 131 132 30+ 32

(11) WELL LOG Ground Elevation _____
Material From To
Top Soil Sandy BRN. 0 2
CLAY BRN. 2 35
CLAY GRAY 35 41
CLAY GREEN 41 131
SAND BLACK FINE 131 132
CLAY GREEN 132 150

RECEIVED
AUG 03 2018
OWRD

Date Started 7-27-18 Completed 7-30-18

(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 657 Date 7-30-18
Signed Clayton Blackman
Contact Info (optional) _____

ORIGINAL - WATER RESOURCES DEPARTMENT