LINN 60273

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

WELL LABEL # L	108579
START CARD#	1017839

(1) LAND OWNER Owner Well I.D. <u>5290 - JR#1</u>	(9) LOCATION OF WELL (legal descri	ption)	
First Name Dave & Cliff Last Name MacHugh		ange 3 W E/W WM	
Company Jackass Mountain Ranch	Sec <u>17 NE</u> 1/4 of the <u>NW</u> 1/4	Tax Lot 101	
Address 660 Dogwood	· -	Lot	
City Pasco State WA Zip 99301	Lat or	DMS or DD	
(2) TYPE OF WORK New Well Deepening Conversion	Long or	DMS or DD	
Alteration (repair/recondition) Abandonment	Street address of well Nearest ad	ldress	
	7048 NE Parker Ln., Albany, OR 97321		
(3) DRILL METHOD			
Rotary Air Rotary Mud Cable Auger Cable Mud	(10) STATIC WATER LEVEL Date SW		
Reverse Rotary Other	Existing Well / Predeepening	VL(psi) + SWL(ft)	
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 09-28-2012	17	
Industrial/ Commercial Livestock Dewatering		/ Hole?	
Thermal Injection Other	WATER BEARING ZONES Depth water was		
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy	•	SWL(psi) + SWL(ft)	
Depth of Completed Well 59 ft.	09-28-2012 27 45 200	SWEETED SWEETED 17	
BORE HOLE SEAL sacks/			
Dia From To Material From To Amt lbs			
16 0 59 Bentonite 0 18 22 S			
		L L	
	(11) WELL LOG Ground Elevation	· <u></u>	
Harmon and about Market Da Do Do Do Do	Otodia Elevation		
How was seal placed: Method A B C D E	Material Topsoil	From To 2	
Other Poured dry	Brown clay	2 27	
Backfill placed from ft. to ft. Material Filter pack from 18 ft. to 59 ft. Material Pea rock Size 3/8	Brown sand	27 34	
	Brown sandy gravel	34 45	
Explosives used: Yes Type Amount	Blue clay	45 59	
(6) CASING/LINER			
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd			
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		-	
12 45 59 375 X		RECEIVED BY OW	
	JONES DRILLING CO., INC.		
Shoe Inside Outside Other Location of shoe(s)	29400 SANTIAM HWY.	UU 1 2 2012	
Temp casing Yes Dia From To	LEBANON, OR 97355		
(7) PERFORATIONS/SCREENS		04/ ====	
Perforations Method	541-367-2560 541-451-2686	SALEM, OR	
Screens Type Wrap rib Material Stainless	1-800-915-8388		
Perf/S Casing/ Screen Scm/slot Slot # of Tele/			
creen Liner Dia From To width length slots pipe size	Date Started 09-26-2012 Completed	09-28-2012	
Screen 12 25 45 .1 12	(unbonded) Water Well Constructor Certification		
	I certify that the work I performed on the construct	tion, deepening, alteration, or	
	abandonment of this well is in compliance with		
	construction standards. Materials used and informat	ion reported above are true to	
A TURN I GROOM - 1 1	the best of my knowledge and belief.	0.00.2012	
(8) WELL TESTS: Minimum testing time is 1 hour		0-09-2012	
● Pump ☐ Bailer ☐ Air ☐ Flowing Artesian	Password : (if filing electronically)	\rightarrow	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed Signed		
150 22 42 2	(bonded) Water Well Constructor Certification		
	I accept responsibility for the construction, deepening, alteration, or abandonment		
	work performed on this well during the construction d		
Temperature 54 °F Lab analysis Yes By	performed during this time is in compliance with construction standards. This report is true to the best		
Water quality concerns? Yes (describe below)	1		
From To Description Amount Units	License Number 1684 Date 10-	09-2012	
	Password : (if filing electronically)		
	Signed Contact Info (optional) jonesdrifting@hotmail.com		
ORIGINAL - WATER RESOURCES I	DEPARTMENT VITHIN 30 DAVE OF YOUR ETION OF WOL	ov.	
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTM	MENT WITHIN 30 DATS OF COMPLETION OF WOR	Form Version: 0.95	