

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.785)

WALH MALH 2510
2510 2510

14s/39e/13ac
 (START CARD) # *15364*

(1) OWNER: Well Number: *1439B(19)*
 Name *Reservoir Land Co. Inc.*
 Address *PO Box 7*
 City *Ironside* State *Ore* Zip *97708*

(9) LOCATION OF WELL by legal description:
 County *Malheur* Latitude _____ Longitude _____
 Township *14* N or S, Range *39* W or W, WM.
 Section *13* SW ¼ NE ¼
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well *361* ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	Each	or pounds
<i>16</i>	<i>0 40</i>	<i>concrete</i>	<i>0 40</i>	<i>38</i>	<i>38</i>
<i>12</i>	<i>0 361</i>				

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From To	Gauge	Steel	Plastic	Welded	Threaded
<i>12</i>	<i>1 361 312</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) *361*

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

From To	Slot size	Number	Tele/pipe size	Casing	Liner
<i>40 361</i>	<i>6"</i>	<i>114 Perfor</i>	<i>44 12</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min *550* Drawdown *170 ft* Drill stem at _____ Time *1 hr.*

Temperature of water *69.640* Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(10) STATIC WATER LEVEL:
13 ft. below land surface. Date *6-7-90*
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
<i>well was cased</i>			
<i>in to 295 ft</i>			
<i>so we pulled the</i>			
<i>original casing &</i>			
<i>put down 321 ft</i>			
<i>of perforated casing</i>			
<i>with drive shoe &</i>			
<i>40 ft of solid casing</i>			
<i>& sealed well with</i>			
<i>cement (annular space)</i>			

Date started *5-16* Completed *6-7*

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:
 I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed *Jon M Fife* WWC Number *1485* Date *7-5-90*

FOR WATER RESOURCES DEPARTMENT USE ONLY

Date Postmarked 5-3-90
 Date Hand-delivered 5-2-90
 Watermaster Initials L.P.

W- 15364
 WRD Receipt
 Date Fee Received _____

START CARD
NOTICE OF BEGINNING OF WELL CONSTRUCTION
 (as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original mailed or delivered to the Water Resources Department, 3850 Portland Road NE, Salem, OR 97310, no later than the day construction, alteration, conversion or abandonment work begins. A \$75 fee shall accompany all notices for new well construction or conversion of an existing hole not previously used as a water well (make checks payable to the Water Resources Department). Notices meeting this requirement but received without the required fee will not be accepted as properly and timely filed. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$75 fee with the start card and for failure to submit cards prior to beginning any construction, alteration, conversion or abandonment work.

Owner's name and mailing address RESERVOIR LAND CO INC
PO BOX 7 IRONSIDE OREGON 97908

Check type of work: New construction Repair Recondition
 Deepening Conversion Abandonment

Proposed Commencement Date ~~10-26-89~~ 5-4-90

Existing or Proposed Well Depth 360 Diameter 12"

Check Use: Domestic Community Industrial Irrigation Monitoring
 Thermal Injection Other _____

Proposed Well Location: County Malheur

Township 14 (N or S) Range 39 (E or W) Section 13

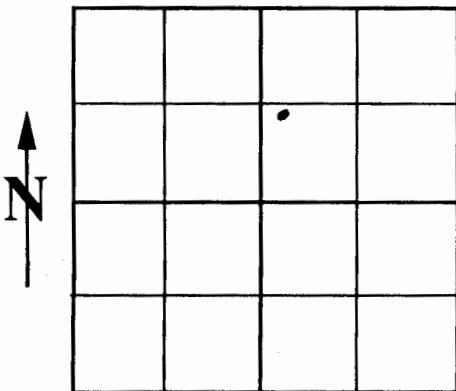
1. SW 1/4 of NE 1/4 of above section

2. Street address of well location Willow Creek Rd
Statewell No# 14/39-bdd

3. Tax lot number of well location _____

4. Attach map with location identified.
 (See reverse of this form for approved maps)

5. Show well location within 1/4, 1/4 of section grid at left.



We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

Reservoir Land Co Jon M. Fife I
 Owner's signature Bonded Water Well Constructor

Title 10-25-1989 Date License No. 1485

446 3566 Home phone 446 3574 Work phone Company Willow Creek Irrigation

NOTE: This is not a water right application. The owner is responsible for obtaining a water right through the Water Resources Department, if required.

THIS COPY TO DISTRICT WATERMASTER