MALH 54103

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537 765 & OAR 690-205-0216

MALH 54103

WELL I.D. LABEL# L 106327

START CARD # 1020812

ORIGINAL LOG #

WATER SUPPLY WELL REPORT	START CARD # 1020812				
(as required by ORS 537.765 & OAR 690-205-0210) 2/3	0RIGINAL LOG #				
(1) LAND OWNER Owner Well 1.D.					
First Name Last Name	(9) LOCATION OF WELL (legal description)				
Company CITY OF ONTARIO	County MALHEUR Twp 18.00 S N/S Range 47.00 E E/W W				
Address 444 SW 4TH STREET	Sec 11 SW 1/4 of the NW 1/4 Tax Lot				
City ONTARIO State OR Zip 97914	Sec 11 SW 1/4 of the 14W 1/4 Tax Lot				
2) TYPE OF WORK New Well Deepening Conversion	Tax Map Number Lot Lat " or 44.02033000 DMS or DD				
Alteration (complete 2a & 10) Abandonment(complete 5a	Lat				
2a) PRE-ALTERATION	Long or116.93630000 DMS or DD				
Dia + From To Gauge Stl Plstc Wld Thrd	Street address of well Nearest address				
Casing:	1900 SE 5TH AVE				
Material From To Amt sacks/lbs	ONTARIO, OREGON 97914				
Seal:	(10) CTATIC WATER LEVEL				
(3) DRILL METHOD	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)				
Rotary Air Rotary Mud X Cable Auger Cable Mud	Date SWL(psi) + SWL(ft) Existing Well / Pre-Alteration				
Reverse RotaryOther	Completed Well				
4) PROPOSED USE Domestic Irrigation X Community	Flaving Adapting Dr. Hale)				
Industrial/Commericial Livestock Dewatering	WATER BEARING ZONES Depth water was first found				
Thermal Injection Other	SWL Date From To Est Flow SWL(psi) + SWL(ft)				
(Attach cop Special Standard (Attach cop	(by) 8/22/2013 11 43 300 13				
Depth of Completed Well 80.50 ft.	11/12/2013 50 78 110 14				
BORE HOLE SEAL sack					
Dia From To Material From To Amt Ibs					
32 0 20 Cement 0 20.2 8400 P					
22 20 80.5					
	(11) WELL LOC				
	(11) WELL LOG Ground Elevation				
How was seal placed: Method A B C D E	Material From To				
X Other PUMPED	brown sandy clay 0 11				
Backfill placed from ft. to ft. Material	Sand & Gravel 11 43				
Filter pack from 15 ft. to 41 ft. Material SILICA SAISize 6/9	Blue Clay 43 50				
	Fine Black Sand 50 78				
	Blue Clay 78 80 5				
(5a) ABANDONMENT USING UNHYDRATED BENTONITE					
Proposed Amount Actual Amount					
(6) CASING/LINER					
Casing Liner Dia + From To Gauge Stl Plstc Wld Thro					
● 16 X 3 35 .375 ● X					
● 16					
Shoe Inside Outside Other Location of shoc(s)					
Temp casing Yes Dia From To					
7) PERFORATIONS/SCREENS					
Perforations Method					
Screens Type Johnson Material Stainless 304	Date Started 8/21/2013 Complete 1/9/2014				
Perf/ Casing/Screen Scrn/slot Slot # of Tele/					
Screen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructed Construction By OW Relation. o				
Screen Casing 16 35 40 .08 16	I certify that the work I performed on the construction, deepening, are attorned on the construction of the construc				
Screen Casing 16 50 75 .03 16	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				
8) WELL TESTS: Minimum testing time is 1 hour	Signed SALEM, OR				
Pump Bailer Air Flowing Artesian					
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification				
	I accept responsibility for the construction, deepening, alteration, or abandonme				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	I accept responsibility for the construction, deepening, alteration, or abandonme work performed on this well during the construction dates reported above. All work				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 400 31 42 24	I accept responsibility for the construction, deepening, alteration, or abandonme work performed on this well during the construction dates reported above. All worperformed during this time is in compliance with Oregon water supply we				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 400 31 42 24	I accept responsibility for the construction, deepening, alteration, or abandonmer work performed on this well during the construction dates reported above. All work				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 400 31 42 24 Temperature 60 °F Lab analysis X Yes By Table Rock Analytical Lab Water quality concerns? Yes (describe below) TDS amount	I accept responsibility for the construction, deepening, alteration, or abandonmer work performed on this well during the construction dates reported above. All wor performed during this time is in compliance with Oregon water—supply we				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 400 31 42 24 Temperature 60 °F Lab analysis Yes By Table Rock Analytical Lab	I accept responsibility for the construction, deepening, alteration, or abandonmer work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply we construction standards. This report is true to the best of my knowledge and belief. License Number 1914 Date 2/3/2014				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 400 31 42 24 Temperature 60 °F Lab analysis X Yes By Table Rock Analytical Lab Water quality concerns? Yes (describe below) TDS amount	I accept responsibility for the construction, deepening, alteration, or abandonmen work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply we construction standards. This report is true to the best of my knowledge and belief. License Number 1914 Date 2/3/2014 Signed DAVID MCLERAN (E-filed)				
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr) 400 31 42 24 Temperature 60 °F Lab analysis X Yes By Table Rock Analytical Lab Water quality concerns? Yes (describe below) TDS amount	I accept responsibility for the construction, deepening, alteration, or abandonmer work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply we construction standards. This report is true to the best of my knowledge and belief. License Number 1914 Date 2/3/2014				

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continuation page			START CARD # 1020812		
	2/3/20	014	ORIGINAL LOG#		
(2a) PRE-ALTERATION	\	Vater Quality Cor	icerns		
Dia + From To Gauge Stl Plstc Wld Thrd	I	From To	Description	Amoun	t Units
Material From To Amt sacks/lbs					
		0) STATIC WA	TED LEVEL		
(5) BORE HOLE CONSTRUCTION BORE HOLE SEAL		SWL Date From		low SWL(psi)	+ SWL(ft)
Dia From To Material From To A	imt lbs				
					+
FILTER PACK From To Material Size	(1	1) WELL LOG			
41 80 SILICA SAND 16/30		Mate	rial	From	То
CACHCILINED					
6) CASING/LINER					
Casing Liner Dia + From To Gauge Stl Plste W	ld Thrd				
99-19-19-99-					
88					
7) PERFORATIONS/SCREENS					
Perf/ Casing/Screen Scrn/slot Slot # of					
Screen Liner Dia From To width length slots	s pipe size		-		_
		<u> </u>			
•					
			F	RECEIVED	BY OW
		omments/Rema	rks	FEB 1	8 2014
(8) WELL TESTS: Minimum testing time is 1 hour			- 100	SALEN	A. OR
Yield gal/min Drawdown Drill stem/Pump depth Duration	n (hr)				,