Amended 4/10/2019

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

MALH 54465

12/3/2018

WELL I.D. LABEL# L 83872
START CARD # 1039570
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name DARLENE Last Name ESKABAR
Company
Address 170 FIR RD
City ONTARIO State OR Zip 97914

(2) TYPE OF WORK

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

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	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/ Commericial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)
Depth of Completed Well 122.50 ft.

BORE HOLE

Dia	From	To
10.5	0	85
6	85	122.5

SEAL

Material	From	To	Amt	sacks/lbs
Granular Bentonite	0	45	37	S
		Calculated	24.18	
Cement	73	85	5	S
		Calculated	3.79	

How was seal placed: Method ☐ A ☐ B ☒ C ☐ D ☐ E
☐ Other
Backfill placed from 45 ft. to 73 ft. Material 3/4 BENTONITE
Filter pack from ft. to ft. Material Size
Explosives used: ☐ Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
●	○	6	☒	1.5	95.5	.250	●	○	☒	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)
Temp casing ☒ Yes Dia 10 From + ☒ 1 To 70

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type v-wire Material stainless steel

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Liner	5	83.5	112.5				5
Screen	Liner	5	112.5	122.5	.2			5

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

● Pump ○ Bailer ○ Air ○ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
15	20	80	4

Temperature 58 °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS amount 580 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County MALHEUR Twp 16.00 S N/S Range 47.00 E E/W WM
Sec 35 SE 1/4 of the NW 1/4 Tax Lot 7501
Tax Map Number Lot
Lat ° ' " or 44.13326200 DMS or DD
Long ° ' " or -116.93820100 DMS or DD
● Street address of well ○ Nearest address
170 FIR RD. , ONTARIO OR

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	11/15/2018			47.5

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 47.50

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
8/4/2018	47.5	65	10			47.5
10/9/2018	114	122.5	15			47.5

(11) WELL LOG

Ground Elevation 2210.00

Material	From	To
Road Mix	0	1
Silty sand , brown	1	8
silty clay ,light blue gray	8	32
sand and pea gravel	32	33
clay brown	33	38
clay brown with sand seam , brown	38	55
clay dark brown	55	59
sand and gravel ,fine brown silts	59	65
clay brown	65	68
clay blue	68	114
Sand gray to white	114	122.5

Date Started 8/3/2018 Completed 11/15/2018

(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 1481 Date 12/3/2018

Signed MARVIN HAINES (E-filed)

Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: