## Amended 11/17/2020 & 4/2/2025

**MALH 54569** 

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210) WELL I.D. LABEL# L START CARD # 211445 211446 ORIGINAL LOG#

181351	1	81	3	6	

Owner Well I.D. 1	-	
First Name Last Name	(9) LOCATION OF WELL (legal description)	
Company Huntington Travel Plazza	County MALHEUR Twp 15 S N/S Range 45 E E/N	W WM
Address 486 NW 9th St	Sec 4 NWNE 1/4 of the SE-SW 1/4 Tax Lot 306	
City Ontario State Or Zip 97914		
(2) TYPE OF WORK   X   New Well   Deepening   Conversion	Tax Map Number Lot  Lat44 _ ° 17 _ ' 36.0@ " or _44.29333333	or DD
Alteration (complete 2a & 10) Abandonment(complete 5a)	Long -117 ° 13 ' 35.86 " or -117.22661111 DMS of	
(2a) PRE-ALTERATION	Street address of well Nearest address	טט זו
Dia + From To Gauge Stl Plstc Wld Thrd Casing:	Street address of well ( Ivearest address	
	5945 Hwy 30 Huntington Or 97907	
Material From To Amt sacks/lbs		
Seal:	(10) STATIC WATER LEVEL	
(3) DRILL METHOD	Date SWL(psi) + SWL(fi	<i>(</i> f
Rotary Air Rotary Mud Cable Auger Cable Mud	Existing Well / Pre-Alteration	-
Reverse Rotary X Other	Completed Well	
(4) PROPOSED USE Domestic Irrigation Community	Flowing Artesian? Dry Hole?	
Industrial/Commercial Livestock Dewatering	WATER BEARING ZONES Depth water was first found	
Thermal Injection X Other Test	SWL Date From To Est Flow SWL(psi) + SWL(	(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy		
Depth of Completed Well 217 ft.	1 <del>                                    </del>	$\dashv$
		-
BORE HOLE SEAL sacks/ Dia From To Material From To Amt lbs		_
10 0 38 Bentonite 0 38 1,200	1	—
Calculated 850	1	
6 38 217		
Calculated	(11) WELL LOG Ground Elevation	
How was seal placed: Method A B XC D E	Material From To	20
	Top Soil 0 6	
X Other Bentonite	Brwon Silt 6 25	-
Backfill placed from ft. to ft. Material	Sand and Gravel 25 30	
Filter pack from ft. to ft. Material Size	Blue Clay 30 217	
Explosives used: Yes Type Amount		
(5a) ABANDONMENT USING UNHYDRATED BENTONITE		
Proposed Amount Pounds Actual Amount Pounds	The state of the s	
Toposca Alliount		
(6) CASING/LINER	RECEIVED	
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	TEVELLE TO THE TENT OF THE TEN	
<ul><li>6 ☐ 1 39 .250</li><li></li></ul>		
	MAR 26 2018	2000
	OWRD	
Shoe Inside X Outside Other Location of shoe(s) 39		
Temp casing X Yes Dia 10 From 2 To 30		
(7) PERFORATIONS/SCREENS		
Perforations Method	Date Started 10-24-2017 Completed 10-25-2017	
Screens Type Material Perf/S Casing/ Screen Scm/slot Slot # of Tele/	Date Started 10-24-2017 Completed 10-23-2017	
creen Liner Dia From To width length slots pipe size	(unbonded) Water Well Constructor Certification	
Cross Enter Day 10m 10 wider longer state	I certify that the work I performed on the construction, deepening, altera	tion, or
	abandonment of this well is in compliance with Oregon water suppl	ly well
	construction standards. Materials used and information reported above are	true to
	the best of my knowledge and belief.	
	License Number Date	
(O) AND A EXPORT AND A COMPANY OF THE COMPANY OF TH		
(8) WELL TESTS: Minimum testing time is 1 hour	Signed	
Pump Bailer • Air Flowing Artesian		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	(bonded) Water Well Constructor Certification	
0 217 8	I accept responsibility for the construction, deepening, alteration, or aban-	donmen
	work performed on this well during the construction dates reported above.	All work
	performed during this time is in compliance with Oregon water sup	ply well
Temperature °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and	bener.
	License Number 682 Date 11-02-2017	
Water quality concerns? Yes (describe below) TDS amount Units  To Description Amount Units	1 1 M M	No. of Contract of
	Signed J J	
	Contact Info (optional)	
ORIGINAL - WATER RESOURCES	DEPARTMENT	0.05
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPART	MENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:	1.95