

STATE OF OREGON
WATER SUPPLY WELL REPORT

MALH 54667

WELL I.D. LABEL# L

140020

START CARD #

1057598

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

7/22/2022

(1) LAND OWNER

Owner Well I.D. _____

First Name CURTIS

Last Name MARTIN

Company JUNIPER MOUNTAIN LAND AND LIVESTOCK LLC

Address PO BOX 194

City NORTH POWDER State OR Zip 97867

(2) TYPE OF WORK☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)**(2a) PRE-ALTERATION**

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
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/ Commercial ☒ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other _____

(5) BORE HOLE CONSTRUCTIONSpecial Standard ☐ (Attach copy)

Depth of Completed Well 424.00 ft.

BORE HOLE			SEAL			Amt	sacks/ lbs
Dia	From	To	Material	From	To		
10	0	96	Bentonite Chips	0	96	2050	P
6	96	424				Calculated 1885.98	
						Calculated	

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other POUR DRY

Backfill placed from _____ ft. to _____ ft. Material _____

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
☒ Inside ☐ Outside ☐ Other Location of shoe(s) _____
 Temp casing ☐ Yes Dia _____ From + _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type 20 slot Material PVC

Perf/ Screen	Casing/ Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen	Liner	4.5	364	424	.02			4.5

(8) WELL TESTS: Minimum testing time is 1 hour☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
12		424	1

Temperature 58 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 374 ppb

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County MALHEUR Twp 15.00 S N/S Range 41.00 E E/W WM

Sec 21 NW 1/4 of the SW 1/4 Tax Lot 1000

Tax Map Number _____ Lot _____

Lat _____ " or 44.24694444 DMS or DD

Long _____ " or -117.70527778 DMS or DD

☐ Street address of well ☒ Nearest address

NO ADDRESS BUT AT 2ND CORRAL SET JUNIPER MTN RD, BROGAN

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	7/21/2022			278
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 360.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
7/21/2022	360	400	12			278

(11) WELL LOG

Ground Elevation _____

Material	From	To
top soil	0	1
sandy clay	1	3
hard (burnt) dark brown clay	3	80
black and red basalt rock mixed layers	80	120
Black+Red basalt +little red clay mixed	120	150
black rock	150	185
black rock with little red clay	185	210
black rock	210	255
black and dark red with red clay mixed	255	292
black rock	292	320
black and red rock mixed layers	320	325
black rock	325	375
black and dark red rock	375	412
dark red to brown rock	412	424

Date Started 7/19/2022

Completed 7/21/2022

(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 1818 Date 7/22/2022

Signed DANIEL MCLERAN (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:

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

MALH 54667

7/22/2022

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 44.24694444 Datum: WGS84

Longitude: -117.70527778

Township/Range/Section/Quarter-Quarter Section:

WM15.00S41.00E21NWSW

Address of Well:

NO ADDRESS BUT AT 2ND CORRAL SET JUNIPER MTN RD, BROGAN

Well Label: 140020

Printed: July 22, 2022

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

