

Amended 7/13/2026

**STATE OF OREGON
WATER SUPPLY WELL REPORT**

MALH 54921

WELL I.D. LABEL# L 160852

START CARD # 1078442

ORIGINAL LOG #

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

4/13/2026

(1) LAND OWNER

Owner Well I.D. _____

First Name KENNETH Last Name FARMSCompany JENSEN FARMSAddress 2436 11TH AVECity VALE State OR Zip 97918**(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
					☐	☐	☐	☐

Seal:

Material	From	To	Amt	sacks/lbs

(3) DRILL METHOD☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger☐ Reverse Rotary ☐ Other _____**(4) PROPOSED USE**☐ Domestic ☒ Irrigation ☐ Community☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering☐ Thermal ☐ Injection ☐ Other _____**(5) BORE HOLE CONSTRUCTION**Special Standard ☐ (Attach copy)Depth of Completed Well 700.00 ft.

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
16	0	120	Cement	0	120	4,888
12	120	410			Calculated	4,736
10	410	700			Calculated	

Seal placement method: ☒ A ☐ B ☐ C ☐ D ☐ E ☐ Other: _____

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

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____Seal Placement Begin Date 7/11/2025 Begin Time 12 00**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	12	☒	1.5	120	0.250	ST	☒		OUT.	120

Temp casing ☒ Yes Dia 16 From + ☐ 0 To 60**(7) PERFORATIONS/SCREENS**

Perforations Method _____

Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrm/slot width	Slot length	# of slots	Tele/ Pipe size

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	500		680	5

Temperature 65 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 330 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County MALHEUR Twp 16.00 S N/S Range 42.00 E E/W WMSec 10 NW 1/4 of the NE 1/4 Tax Lot 300

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 44.19869100 DMS or DD

Long _____ ° _____ ' _____ " or -117.55614700 DMS or DD

☐ Street address of well ☒ Nearest address2436 11TH AVE, VALE, OR 97918**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	7/18/2025			13

Flowing Artesian? ☐ Dry Hole? ☐**WATER BEARING ZONES**Depth water was first found 105.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
7/14/2025	105	180	35			60
7/14/2025	255	260	15			60
7/15/2025	300	330	10			60
7/15/2025	360	420	30			60
7/16/2025	492	580	50			60

(11) WELL LOGGround Elevation 3029.05 FT

Material	From	To
Clays & Basalts	0	14
Brown Clays	14	105
Basalts	105	175
Red Lavas	175	180
Red Lavas & Brown Clays	180	193
Claystone	193	300
Mixed Basalts	300	330
Fractured Basalts	330	360
Hard Brown Basalts	360	420
Soft Brown Basalts	420	485
Brown Basalts	485	492
Brown & Red Medium Basalts	492	580
Brown Basalts	580	665
Red Basalts	665	700

Construction

Begin Date 7/7/2025 Begin Time 09 00 End Date 7/18/2025**(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 1943 Date 4/13/2026Signed TRINITY VILLINES (E-filed)**(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 1943 Date 4/13/2026Signed TRINITY VILLINES (E-filed)Drilling Company: Dig Well Idaho

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.

Comments/Remarks

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: 44.198691 Datum: WGS84

Longitude: -117.556147

Township/Range/Section/Quarter-Quarter Section:

WM 16S 42E 10 NWNE

Address of Well:

2436 11TH AVE, VALE, OR 97918

Well Label: L160852

Well Log: MALH 54921

Printed: June 29, 2026

DISCLAIMER: This map is intended to represent the approximate location of the exempt use well provided by the land owner. It is not intended to be construed as survey accurate in any manner.

Generated by OWRD

