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STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765)

WATER RESOURCES DEPT.  
SALEM, OREGON

WELL I.D. # L. 20429  
START CARD # 110018

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number 2  
Name T K O LLC  
Address 73037 BUNKER HILL  
City HEPPNER State OR Zip 97836

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Flammable  Injection  Livestock  Other

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No. Depth of Completed Well 250 ft.  
Explosives used  Yes  No Type - Amount -

HOLE SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
12	0	29	BENTONITE	0	29	62 SACKS
8	29	250				

How was seal placed: Method  A  B  C  D  E  
 Other POURED DOWN DRY  
Backfill placed from     ft. to     ft. Material      
Gravel placed from     ft. to     ft. Size of gravel    

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8	+2	29	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) NO SHOE USED

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Telephone size	Casing	Liner
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
600	0	249	1 hr.

Temperature of water 63 Depth Artesian Flow Found      
Was a water analysis done?  Yes By whom      
Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other      
Depth of strata:    

(9) LOCATION OF WELL by legal description:  
County MORROW Latitude     Longitude      
Township 2 N or S Range 26 E or W. WM.  
Section 8 S W 1/4 N W 1/4  
Tax Lot 1200 Lot     Block     Subdivision      
Street Address of Well (or nearest address) NORTH SIDE OF HWY 207

(10) STATIC WATER LEVEL:  
145 ft. below land surface. Date 4-6-00  
Artesian pressure - lb. per square inch. Date -

(11) WATER BEARING ZONES:  
Depth at which water was first found 192

From	To	Estimated Flow Rate	SWL
192	202	10 + GPM	145
202	210	40 + GPM	145
210	250	600 + GPM	145

(12) WELL LOG:  
Ground Elevation    

Material	From	To	SWL
SANDY SOIL	0	9	
fractured BASALT	9	29	
BLACK BASALT	29	140	
TAN GRAVEL CONG	140	150	
BLACK BASALT	150	192	
GREEN GRAVEL CONG	192	202	145
FRACTURED GREEN BASALT	202	210	145
VESICULAR GRAVELS	210	250	145

Date started 4-4-00 Completed 4-6-00

(unbonded) Water Well Constructor Certification:  
I certify that the work I performed on the construction, 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.

WWC Number      
Signed     Date    

(bonded) Water Well Constructor Certification:  
I accept responsibility for the construction, 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.

Signed David Smith WWC Number 1556 Date 4-11-00