

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

11-20-2007

WELL LABEL # L 90285

START CARD # 1002682

AMENDED

(1) LAND OWNER
Owner Well I.D.
First Name JEFF Last Name BOSMA
Company SAGE HOLLOW RANCH
Address 3620 INDEPENDANCE RD
City SUNNYSIDE State WA Zip 98944

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

(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 CONSTRUCTION
Special Standard Attach copy
Depth of Completed Well 544.00 ft.

Table with columns: Dia, From, To, Material, SEAL, To, Amt, lbs. Includes entry for Cement seal.

How was seal placed. Method A B C D E
Backfill placed from ft to ft Material
Filter pack from ft to ft Material Size
Explosives used: Yes Type Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe Inside Outside Other Location of shoe(s)
Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type Material
Table with columns: Perf/S, Casing/Screen, Dia, From, To, Scm/slot width, Slot length, # of slots, Tele/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Temperature 60 °F Lab analysis Yes By
Water quality concerns? Yes (describe below)
Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)
County Morrow Twp 3.00 N N/S Range 26.00 E E/W WM
Sec 10 NE 1/4 of the NE 1/4 Tax Lot 1001
Tax Map Number Lot
Lat 0 or DMS or DD
Long 0 or DMS or DD
Street address of well Nearest address
POLELINE RD & HOMESTEAD RD.

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Predeepening
Completed Well 11-19-2007 360
Flowing Artesian? Dry Hole?

WATER BEARING ZONES
Depth water was first found
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft)

(11) WELL LOG
Ground Elevation
Material From To
RECEIVED FEB 21 2008
WATER RESOURCES DEPT SALEM, OREGON
Date Started 11-08-2007 Completed 11-19-2007

(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 1735 Date 11-20-2007
Electronically Filed
Signed CHAD COURTNEY (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 544 Date 11-20-2007
Electronically Filed
Signed LARRY BURD (E-filed)
Contact Info (optional)