

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL I.D. LABEL# L 117310
START CARD # 1029523
ORIGINAL LOG #

3/10/2016

(1) LAND OWNER Owner Well I.D. Batch Plant
First Name GREG Last Name TE VELDE
Company
Address 5850 AVENUE 160
City TIPTON State CA Zip 93272

(2) TYPE OF WORK [X] New Well [] Deepening [] Conversion
[] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: [] [] [] [] [] [] [] []
Material From To Amt sacks/lbs
Seal: [] [] [] [] [] []

(3) DRILL METHOD
[] Rotary Air [] Rotary Mud [X] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE [] Domestic [] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [X] Other CONSTRUCTION

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)
Depth of Completed Well 155.00 ft

Table with columns: Dia, From, To, Material, SEAL, Amt, sacks/lbs. Rows include Bentonite Chips and Calculated values.

How was seal placed: Method [] A [] B [] C [] D [] E
[X] Other BENTONITE POURED
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
Shoe [] Inside [X] Outside [] Other Location of shoe(s)
Temp casing [] Yes Dia ___ From ___ To ___

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type johnson Material stainless
Perf/ Casing/ Screen Screen Liner Dia From To Scrn/slot Slot # of Tele/
width length slots 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 57 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount
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 16 SW 1/4 of the SW 1/4 Tax Lot 500
Tax Map Number Lot
Lat ' ' or ' ' DMS or DD
Long ' ' or ' ' DMS or DD
[] Street address of well [X] Nearest address

NEAREST: WEST OF POLELINE RD AND HOMESTEAD LN IN BOARDMAN

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 2/26/2016 33
Flowing Artesian? [] Dry Hole? []

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Row 1: 2/9/2016, 33, 155, 3, 33.

(11) WELL LOG
Ground Elevation
Material From To
Top soil/ silty sand 0 10
silty sand 10 20
tan silty loam 20 33
brown silty sand 33 58
brown silty loam/gravels 58 112
silty sand/gravels 112 121
silty sand 121 130
brown silt/ gravels 130 142
brown sand/gravels 142 150
broken black basalt 150 151
black basalt 151 155

RECEIVED BY OWRD

DEC 22 2016

SALEM, OR

Date Started 2/1/2016 Completed 2/26/2016

(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 1766 Date 3/10/2016
Signed BRANDON C BROWN (E-filed)
Contact Info (optional) brandon@waterwelldeveloping.com