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

SHER 50212 06-14-2007

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WELL LABEL # L 66336

START CARD # 1001166

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description	n)	
First Name ROBERT Last Name SCHARF		18.00 E E/W WM	
Company	Sec <u>19</u> <u>NW</u> 1/4 of the <u>NE</u> 1/4 Tax	Lot 4300	
Address 7695 TUCKER ROAD	Tax Map Number Lot		
City AMITY State OR Zip 97101	Lat 45 °38 '946 " or 45.89611111	DMS or DD	
(2) TYPE OF WORK New Well Deepening Conversion	Long -120 °36 '627 " or -120.77416667	DMS or DD	
Alteration (repair/recondition)	Street address of well Nearest address	5	
(3) DRILL METHOD	96900 HERIN LANE, WASCO, OR		
Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(p	si) + SWL(ft)	
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening		
Industrial/Commercial Livestock Dewatering	Completed Well 06-12-2007	131	
Thermal Injection Other	Flowing Artesian? Dry Hol		
	WATER BEARING ZONES Depth water was first		
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy			
Depth of Completed Well 281.00 ft.	06-11-2007 205 245 40	131	
BORE HOLE SEAL sacks/ Dia From To Material From To Amt lbs			
$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
8 138 281			
	(11) WELL LOG Ground Elevation 1,468		
How was seal placed: Method $\square A \square B \boxtimes C \square D \square E$		om To	
Other cement / 4% bent	silty dirt	0 8	
Backfill placed from ft. to ft. Material	silty clay white clench	8 13 13 19	
Filter pack from 130 ft. to 281 ft. Material gravel Size pea gravel	broken vesicular rock black grey & brown	<u>19</u> 19 30	
Explosives used: Yes Type Amount	grey basalt layers reddish brown rock broken	<u>30</u> 105	
(6) CASINC/LINED	· · ·	105 120	
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	grey basalt / brown streaks in fractured zones med	120 140	
●		140 153	
	¢ ,	153 175	
$ \begin{array}{ c c c c c c c c c c c c c c c c c c c$	6,	175 185 185 195	
		185 195 195 205	
		205 245	
Shoe Inside Outside Other Location of shoe(s)		245 255	
Temp casing Yes Dia From To	grey rock	255 260	
(7) PERFORATIONS/SCREENS		260 263	
Perforations Method	grey & black basalt fractured	263 281	
Screens Type Alloy Material Stainless Steel			
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/	Date Started 06-06-2007 Completed 06-12	2-2007	
Screen LinerDiaFromTowidthlengthslotspipe sizeScreen4210252.035			
	(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 Ore		
	construction standards. Materials used and information reported above are true to		
	the best of my knowledge and belief.		
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date		
Pump Bailer Air Flowing Artesian	Electronically Filed		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed		
40 280 2	(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		
Temperature 57 °F Lab analysis Yes By	performed during this time is in compliance with Oregon water supply well		
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.		
From To Description Amount Units	License Number 1293 Date06-14-2007		
	Electronically Filed		
	Signed JIM J HANSEN (E-filed)		
	Contact Info (optional)		

ORIGINAL - WATER RESOURCES DEPARTMENT

ORIGINAL - WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.88