

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

(WELL I.D.)# L 72469

(START CARD) # 168785

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

(1) OWNER: White Brothers Co. Inc. Well Number B
 Name White Brothers Co. Inc.
 Address PO Box 683
 City Walla Walla State WA Zip 99362

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

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

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

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 282 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
20	0	301	Cement	0	87	~375 sacks

How was seal placed: Method A B C D E
 Other _____
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from 75 ft. to 301 ft. Size of gravel pea

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12	+2	298	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
16	+1.7	94	.375	<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) _____

(7) PERFORATIONS/SCREENS:

Perforations Method Factory mill cut
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
135	175	.19x2.5	1350			<input checked="" type="checkbox"/>	<input type="checkbox"/>
189	290	.19x2.5	3400			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
420	59		1 hr.
420	61.5		4 hours
420	62.5		8 hours

Temperature of water 59 F 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 Umatilla Latitude _____ Longitude _____
 Township 6 N Range 34 E WM.
 Section 18 NE 1/4 SE 1/4
 Tax Lot 601 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 85201 White Reservoir Rd, Milton-Freewater, OR 97862

(10) STATIC WATER LEVEL:
73 ft. below land surface. Date 4/29/05
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found indeterminate: flooded hole

From	To	Estimated Flow Rate	SWL
sand & gravel format	ions below SWL	see (8)	see (10)
RECEIVED			
JUN 14 2005			

(12) WELL LOG: WATER RESOURCES DEPT SALEM, OREGON
 Ground Elevation _____

Material	From	To	SWL
Loam, brown, silty	0	28	
Clay, grey, soft w/some gravel, small	28	65	
Sand, black, medium-fine	65	71	
Gravel, 2"- w/some cobbles	71	111	
Gravel, 2"-w/sand, brown, coarse	111	157	
Clay, brown, medium	157	165	
Gravel, 1.5"- w/clay, brown, soft	165	174	
Clay, brown, soft	174	181	
Clay, brown, soft w/gravel, 1"-	181	191	
Gravel, 1.5"- w/sand, multi-colored, coarse	191	227	
Clay, brown, soft w/gravel, small	227	237	
Clay, brown, soft w/gravel, 1.5"-	237	250	
Gravel, 1.5"- w/some cementation & clay, brown, soft	250	285	
Clay, brown, soft w/some gravel, small	285	301	
sand cement plug in bottom of 12" casing	282	298	
plate ring with access ports welded between 12" & 16" casings			

Date started 3/24/05 Completed 5/20/05

(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.

Signed [Signature] WWC Number 1797
 Date 6/10/05

(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 [Signature] WWC Number 649
 Date 6/10/05