

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

02-11-2009

WELL LABEL # L 95691

START CARD # 1006273

(1) LAND OWNER Owner Well I.D. _____

First Name HOOT Last Name ROYER
Company _____
Address 78668 POWERLINE RD
City HERMISTON State OR Zip 97838

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

(3) DRILL METHOD

[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other _____

(4) PROPOSED USE [X] Domestic [] Irrigation [] Community

[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other _____

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)

Depth of Completed Well 283.00 ft.

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, lbs. Rows include Bentonite and Cement.

How was seal placed: Method [] A [] B [X] C [] D [] E

[X] Other POURED BENTONITE

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: [] Yes Type _____ Amount _____

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes a diagram of casing types.

Shoe [X] Inside [] Outside [] Other Location of shoe(s) 78

Temp casing [] Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type _____ Material _____

Perf/S Casing/ Screen green Liner Dia From To Scrn/slot width Slot length # of slots Tele/ pipe size

Table for perforations/screens with columns for Dia, From, To, width, length, slots, pipe size.

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Rows show 300 and 75 yield.

Temperature 61 °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 Umatilla Twp 5.00 N N/S Range 28.00 E E/W WM
Sec 27 SE 1/4 of the NE 1/4 Tax Lot 305

Tax Map Number _____ Lot _____

Lat _____ ' _____ " or _____ DMS or DD

Long _____ ' _____ " or _____ DMS or DD

[X] Street address of well [] Nearest address

81180 SAGEBRUSH LN

(10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)

Table with columns: Existing Well / Predeepening, Completed Well, Date, SWL(psi), SWL(ft).

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 35

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Rows show data for 02-09-2009, 02-10-2009.

(11) WELL LOG

Ground Elevation _____

Table with columns: Material, From, To. Lists layers like SAND, GRAVEL, GREEN CLAY, BLACK BASALT, etc.

Date Started 02-09-2009 Completed 02-10-2009

(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.

License Number 1735 Date 02-11-2009

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.

License Number 544 Date 02-11-2009

Electronically Filed

Signed LARRY BURD (E-filed)

Contact Info (optional)