

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

WELL I.D. LABEL# L 111920
 START CARD # 1045005
 ORIGINAL LOG #

(1) LAND OWNER
 First Name Todd Owner Well ID
 Last Name Longgood
 Company
 Address 101 SE 3rd St
 City Pendleton State OR Zip 97801

(2) TYPE OF WORK 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 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 645 ft.
 BORE HOLE SEAL sacks/
 Dia From To Material From To Amt lbs

12	0	418	Cement	0	418	629
418	418	645				629
						Calculated
						Calculated

 How seal placed: Method A B C D E
 Other
 Backfill placed from 639 ft. to 418 ft. Material port-land cement-sand
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
 Proposed Amount Pounds Actual Amount Pounds

(6) CASING/LINER
 Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd

<input checked="" type="checkbox"/>	<input type="checkbox"/>	9	2	0	418	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Shoe Inside Outside Other Location of shoe(s) _____
 Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type _____ Material _____
 Perf/S Casing/ Screen Dia From To Sem/slot Slot # of Tele/
 creen Liner Dia From To width length slots pipe size

 OWRD

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

300+			2

 Temperature 67 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 368
 From To Description Amount Units

UMAT 58365
 (9) LOCATION OF WELL (legal description)
 County Umatilla Twp 4 N N/S Range 30E E/W WM
 Sec 35 SE 1/4 of the SW 1/4 Tax Lot 3701
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address
78203 Stage Gulch rd.
Pendleton, OR 97801

(10) STATIC WATER LEVEL
 Date SWL(psi) + SWL(ft)
 Existing Well / Pre-Alteration _____
 Completed Well 1-17-20 _____ 177
 Flowing Artesian? Dry Hole?
 WATER BEARING ZONES Depth water was first found 20'
 SWL Date From To Est Flow SWL(psi) + SWL(ft)

11-21	73	95	10GPM	241
11-21	305	310	110GPM	241
11-21	336	340	5GPM	241
11-23	635	639	300GPM	177

(11) WELL LOG
 Ground Elevation

Material	From	To
TOP SOIL	0	12
Broken Brown Basalt	12	15
Black Basalt	15	21
Hard Grey Bas. Broken Bas. 1/20	21	26
Hard Grey Basalt	26	78
Soft Black B. Green clay veins	73	173
Black Bas. Fractured Hard	173	246
Soft Black, Green clay	246	248
Black Bas. mH	248	254
Soft Black B. Green clay #	254	256
Black Basalt mH	256	305
vesicular Basalt, Green clay vs.	305	316
Black Basalt mH	316	336
vesicular Basalt vs.	336	346
Black Basalt mH	346	393
Soft Black Bas.	393	398
Hard Grey Basalt	398	433
Brown Bas. VS	433	440
Black Basalt mH	440	443

 Date Started 11/18/19 Completed 11/17/20

(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 1942 Date 3/9/20
 Signed Paul Hansen
 Contact Info (optional) _____

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

WELL I.D. LABEL# L 111920 START CARD # 1045605 ORIGINAL LOG #

(1) LAND-OWNER Owner Well I.D. First Name Todd Last Name Longgood Company 101 SE 3rd St. Address Pendleton State OR Zip 97801

(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: Seal: Material From To Amt sacks/lbs

(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 ft. BORE HOLE Dia From To Material SEAL From To Amt sacks/lbs

How was seal placed: Method [] A [] B [] C [] D [] E [] Other 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 Pounds Actual Amount Pounds

(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 Perf/S Casing/Screen Dia From To Sern/slot Slot # of Tel/ green Liner Dia From To width length 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 °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 Umatilla Twp 4 N N/S Range 30 E E/W WM Sec 35 SE 1/4 of the SW 1/4 Tax Lot 3701 Tax Map Number Lot Lat " or " DMS or DD Long " or " DMS or DD Street address of well Nearest address 78203 Stage Coach Rd. Pendleton, OR 97801

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

WATER BEARING ZONES Depth water was first found SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG Ground Elevation Material From To Red Basalt soft 443 454 Black Bas. Green clay seams 454 497 Black B. Blue Clay ves. vs 497 501 Black Bas. 501 504 Brown Bas. ves. 504 512 Black Basalt Blue Clay Seams 512 577 Black Bas. Green clay Seams 577 591 Brown, Black Basalt 591 599 Black Bas. Blue Seams ves. (S) 599 610 Black Bas. m. 610 635 Brown Basalt ves. Decomposed. (VS) H2O 300 + 6pm 635 644 Basalt Mt. 644 645

Date Started 11/18/19 Completed 1/17/20

(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 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. License Number 1942 Date 3/9/20 Signed Contact Info (optional)

RECEIVED

NOV 18 2020

OWRD