

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

G-13397-APP-4 UNIO 50763
JUN 22 1995

(START CARD) # 14847

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT. SALEM, OREGON

(1) OWNER: Well Number _____
Name John Cuthbert
Address 63502 Sandridge Rd.
City LA GRANDE State Oregon Zip 97350

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

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other AIR REVERSE

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 2344 ft.
Explosives used Yes No Type _____ Amount _____

| HOLE | | | SEAL | | | |
|----------|------|-----|----------|------|------|-----------------|
| Diameter | From | To | Material | From | To | Sacks or pounds |
| 22" | 0 | 358 | Cement | 0 | 160 | 180 |
| 17 1/2" | 358 | 936 | Cement | 150 | 1950 | 100 |

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

(6) CASING/LINER:

| Diameter | From | To | Gauge | Steel | Plastic | Welded | Threaded |
|-------------|-------|-----|-------|-------------------------------------|-------------------------------------|-------------------------------------|--------------------------|
| Casing: 16" | 31 | 350 | 375 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| | 12750 | 350 | 1938 | 312 | <input checked="" type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner: | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

(7) PERFORATIONS/SCREENS:

Perforations Method Holtz 12" with star cutter
 Screens Type mills knife Material STEEL

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|------|------|-----------|--------|----------|----------------|--------|-------------------------------------|
| 500 | 1822 | 1.25x4 | 55 | 34 | 12" | 12750 | <input checked="" type="checkbox"/> |

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

Pump Bailer Air Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time | |
|---------------|----------|---------------|------|-------|
| 2600' | 50 | 100' | 850 | 1 hrs |

Temperature of water 70° 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 Union Latitude _____ Longitude _____
Township 2S N or S Range 38E E or W. WM.
Section 24 NE 1/4 NE 1/4
Tax Lot 6700 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 63528 Sandridge Rd.

(10) STATIC WATER LEVEL:
59' ft. below land surface. Date 1-31-94
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found _____

| From | To | Estimated Flow Rate | SWL |
|------|----|---------------------|-----|
| | | | |
| | | | |
| | | | |
| | | | |

(12) WELL LOG:
Ground Elevation _____

| Material | From | To | SWL |
|------------------------------|------|-----|-----|
| Top soil | 1 | 2 | |
| Sand - tan | 2 | 31 | |
| Sand - clay tan | 31 | 72 | |
| Sand | 72 | 76 | 13' |
| Sand + clay - brown | 76 | 83 | |
| Sand brown | 83 | 86 | |
| Sand stone + sand | 86 | 94 | |
| Sand + clay tan | 94 | 96 | |
| Sand + clay | 96 | 98 | |
| Clay + Sand - tan | 98 | 102 | |
| Sand | 102 | 103 | |
| Sand stone + clay + | 103 | 106 | |
| Black rock | | | |
| Clay - brown "soft" | 106 | 113 | |
| Clay + Sand stone - gray | 113 | 168 | |
| Clay - green - soft | 168 | 171 | |
| Sand - coarse + clay - green | 171 | 180 | |
| grey | | | |
| Clay - gray + soft | 180 | 198 | |
| Clay + sand coarse - gray | 198 | 268 | |

Date started 8-11-92 Completed _____

(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 _____ WWC Number _____
Date _____

(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 _____ WWC Number _____
Date _____

JUN 2 2 1995

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

(START CARD) #

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

SALEM, OREGON

(1) OWNER: John Cuthbert, Well Number, Address 63502 Sandridge Rd., City LAGRANDE, State OREGON, Zip 97785

(2) TYPE OF WORK: [X] New Well, [] Deepening, [] Alteration, [] Abandonment

(3) DRILL METHOD: [] Rotary Air, [X] Rotary Mud, [] Cable, [] Auger, [X] Other AIR REVERSE

(4) PROPOSED USE: [] Domestic, [] Community, [] Industrial, [X] Irrigation, [] Thermal, [] Injection, [] Livestock, [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [] No, Depth of Completed Well 2844 ft., Explosives used [] Yes [] No

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds

How was seal placed: Method [] A [] B [] C [] D [] E, Backfill placed from ft. to ft., Material, Gravel placed from ft. to ft., Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour, [] Pump, [] Bailer, [] Air, [] Artesian, Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water, 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, Latitude, Longitude, Township, N or S Range, E or W. WM., Section, 1/4, 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well

(10) STATIC WATER LEVEL: ft. below land surface, Date, Artesian pressure lb. per square inch, Date

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

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Includes entries like CLAY-GREY+WOOD, CLAY-GREEN+SOFT, SAND-COURSE GREEN+BLACK, etc.

Date started, Completed

(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. Signed, WWC Number, Date

(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. Signed, WWC Number, Date

STATE OF OREGON WATER WELL REPORT

(as required by ORS 537.765)

JUN 2 1995

(START CARD) #

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

(1) OWNER: Well Number

Name John Cuthbert
Address 63502 Sandridge Rd.
City LA Grange State Oregon Zip 97120

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

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

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

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

Table with columns: HOLE (Diameter, From, To), SEAL (Material, From, To), Sacks or pounds

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

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Table with columns: Pump/Bailer/Air/Flowing Artesian, Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water 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 Latitude Longitude
Township N or S Range E or W. WM.
Section 1/4 1/4
Tax Lot Lot Block Subdivision
Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:
ft. below land surface. Date
Artesian pressure lb. per square inch. Date

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

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:
Ground Elevation

Table with columns: Material, From, To, SWL. Contains handwritten log entries like CLAY-GREY, SANDSTONE, GRAVEL, etc.

Date started Completed

(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.
Signed WWC Number Date

(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.
Signed WWC Number Date

JUN 22 1995

STATE OF OREGON WATER WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT. (START CARD) # SALEM, OREGON

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

(1) OWNER: Well Number _____ Name John Cuthbert

Address 63502 Sandridge Rd City Astoria State Oregon Zip 97103

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

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

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

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

Table with columns: HOLE Diameter, SEAL From, To, Material, From, To, Sacks or pounds

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

Table for CASING/LINER with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour. Table with columns: Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water _____ 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 _____ Latitude _____ Longitude _____ Township _____ N or S Range _____ E or W. WM. _____ Section _____ 1/4 _____ 1/4 _____ Tax Lot _____ Lot _____ Block _____ Subdivision _____ Street Address of Well (or nearest address) _____

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

(11) WATER BEARING ZONES: Depth at which water was first found _____

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation _____

Table for WELL LOG with columns: Material, From, To, SWL

Date started _____ Completed _____

(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 _____ WWC Number _____ Date _____

(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 _____ WWC Number _____ Date _____

STATE OF OREGON WATER WELL REPORT

(as required by ORS 537.765)

JUN 2 1995

(START CARD) #

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

SALEM, OREGON

(1) OWNER: Well Number

Name John Cathbert
Address 103502 S. ...
City HA Grand State Oregon Zip

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

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

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

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

Table with columns: HOLE Diameter, SEAL From, To, Material, From, To, Sacks or pounds

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

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour
Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem at Time
Temperature of water 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 Latitude Longitude
Township N or S Range E or W. WM.
Section 1/4 1/4
Tax Lot Lot Block Subdivision
Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:
ft. below land surface. Date
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL
clay-grey + soft 974 993
clay + sand - grey 993 1016
clay-grey + soft 1016 1019
clay + sand - grey 1019 1023
clay-black + soft 1023 1025
clay-green + soft 1025 1026
clay-brown + hard 1026 1040
clay-brown + green 1040 1042
clay-black 1042 1045
Sand + gravel 1045 1063
clay-green - soft 1063 1070
clay + sand-green + brown 1070 1082
clay-grey - soft 1082 1108
Sand + clay-green - soft 1108 1109
Sandstone 1109 1110
clay-green 1110 1111
Sand + gravel 1/4 3/8 1111 1119
Sand + clay-green 1119 1121
clay-green + soft 1121 1138
Sand-course + sandstone 1138 1141

Date started Completed

(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.
WWC Number
Signed Date

(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.
WWC Number
Signed Date

STATE OF OREGON WATER WELL REPORT

JUN 22 1995

(START CARD) #

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

SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County Latitude Longitude Township N or S Range E or W. WM. Section 1/4 1/4 Tax Lot Lot Block Subdivision Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:

ft. below land surface. Date Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Ground Elevation

Table with columns: Material, From, To, SWL. Contains handwritten entries like CLAY-GREEN, SAND-COURSE, etc.

Date started Completed

(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.

Signed WWC Number Date

(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.

Signed WWC Number Date

(1) OWNER: Well Number

Name John Cathbert Address 103502 Sandridge Rd. City LA Grande State Oregon Zip 97120

(2) TYPE OF WORK

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well ft. Explosives used Yes No Type Amount

HOLE SEAL

Table with columns: Diameter, From, To, Material, From, To, Sacks or pounds

How was seal placed: Method A B C D E Other

Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes Casing and Liner rows.

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Includes Perforations and Screens rows.

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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water Depth Artesian Flow Found Was a water analysis done? Did any strata contain water not suitable for intended use? Depth of strata:

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

JUN 2 1995

(START CARD) #

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

(1) OWNER:

Name John Cuthbert, Address 63502 Sandridge Rd., City La Grange, State Oregon, Zip 97150

Well Number

WATER RESOURCES DEPT. SALEM, OREGON

LOCATION OF WELL by legal description:

County, Latitude, Longitude, Township, N or S Range, E or W. WM., Section, 1/4, 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well

(2) TYPE OF WORK

New Well, Deepening, Alteration (repair/recondition), Abandonment

(3) DRILL METHOD:

Rotary Air, Rotary Mud, Cable, Auger, Other

(4) PROPOSED USE:

Domestic, Community, Industrial, Irrigation, Thermal, Injection, Livestock, Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes/No, Depth of Completed Well ft., Explosives used Yes/No, Type, Amount

HOLE

SEAL

Table with columns: Diameter, From, To, Material, From, To, Sacks or pounds

How was seal placed: Method A, B, C, D, E, Other

Backfill placed from ft. to ft. Material, Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded, Casing, Liner

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner, Perforations, Screens

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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water, Depth Artesian Flow Found, Was a water analysis done?, Did any strata contain water not suitable for intended use?, Depth of strata:

(10) STATIC WATER LEVEL:

ft. below land surface, Date, Artesian pressure lb. per square inch, Date

(11) WATER BEARING ZONES:

Depth at which water was first found

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Ground Elevation

Table with columns: Material, From, To, SWL. Includes entries like clay-green + soft, sand + gravel, etc.

Date started, Completed

(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.

Signed, WWC Number, Date

(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.

Signed, WWC Number, Date

STATE OF OREGON WATER WELL REPORT

JUN 22 1995

(START CARD) #

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

(1) OWNER: Well Number

Name John Cuthbert
Address 163502 Sandberg Rd.
City La Grande State Oregon Zip 97850

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

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

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

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

Table with columns: HOLE Diameter, SEAL From, To, Material, From, To, Sacks or pounds

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

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Casing, Liner

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

Temperature of water 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 Latitude Longitude
Township N or S Range E or W. WM.
Section 1/4 1/4
Tax Lot Lot Block Subdivision
Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:
ft. below land surface. Date
Artesian pressure lb. per square inch. Date

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

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:
Ground Elevation

Table with columns: Material, From, To, SWL
GRAVEL + CLAY - GREEN 1549 1552
CLAY - GREEN + SOFT 1552 1673
CLAY - GREEN - HARD + DRY 1673 1677
CLAY GREEN + SOFT 1677 1681
SAND COURSE + CLAY GREEN 1681 1683
CLAY - GREEN - SOFT 1683 1741
CLAY + SHALE - HARD 1741 1754
SAND COURSE - CLAY GREEN 1754 1756
CLAY GREEN - SOFT 1756 1769
GRAVEL - CLAY GREEN SOFT 1769 1777
SAND COURSE + GRAVEL 1777 1786
CLAY - BROWN - SOFT 1786 1814
SHAPE + CLAY - BROWN HARD 1814 1842
CLAY - BROWN + GREEN - BLACK + SOFT 1842 1859
CLAY - GREEN + GRAY - SOFT 1859 1869
CLAY IS CAVING IN - Silting hole
SHALE - BROWN - HARD + 1869 1878
CLAY - GREEN SOFT

Date started Completed

(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.
WWC Number
Signed Date

(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.
WWC Number
Signed Date

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

JUN 22 1995

(START CARD) #

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

(1) OWNER: John Cuthbert Well Number Address 123502 City LA GRANGE State Oregon Zip 97030

(2) TYPE OF WORK: New Well, Deepening, Alteration, Abandonment

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

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval, Explosives used

Table with columns: HOLE Diameter, SEAL From, To, Material, From, To, Sacks or pounds

How was seal placed: Method A, B, C, D, E, Other

Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour. Pump, Bailer, Air, Flowing Artesian. Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water, Depth Artesian Flow Found, Was a water analysis done?, Did any strata contain water not suitable for intended use?, Salty, Muddy, Odor, Colored, Other

(9) LOCATION OF WELL by legal description: County, Latitude, Longitude, Township, N or S Range, E or W. WM., Section, 1/4, 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well

(10) STATIC WATER LEVEL: ft. below land surface, Date, Artesian pressure, lb. per square inch, Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation

WELL LOG Table with columns: Material, From, To, SWL. Includes entries like CLAY-BROWN + SOFT, CLAY-BROWN + GREEN SOFT, CLAY-TAN + SOFT, etc.

Date started, Completed

(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.

(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.

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

JUN 22 1995

(START CARD) #

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

SALEM, OREGON

(1) OWNER: John Cuthbert Well Number Address 63502 Sandridge Rd City WA GRANDE State OREGON Zip 97150

(9) LOCATION OF WELL by legal description: County Latitude Longitude Township N or S Range E or W. WM. Section 1/4 1/4 Tax Lot Lot Block Subdivision Street Address of Well (or nearest address)

(2) TYPE OF WORK: [] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment (3) DRILL METHOD: [] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(10) STATIC WATER LEVEL: ft. below land surface. Date Artesian pressure lb. per square inch. Date

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

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

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

Table with 4 columns: From, To, Estimated Flow Rate, SWL

HOLE SEAL Diameter From To Material From To Sacks or pounds How was seal placed: Method [] A [] B [] C [] D [] E Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(12) WELL LOG: Ground Elevation

(6) CASING/LINER: Diameter From To Gauge Steel Plastic Welded Threaded Casing: Liner:

Table with 4 columns: Material, From, To, SWL. Contains handwritten entries like CLAY-GREEN + BASALT BLACK, CLAY-BROWN + BASALT BLACK, etc.

(7) PERFORATIONS/SCREENS: [] Perforations [] Screens Method Type Material Slot size Number Diameter Tele/pipe size Casing Liner

Date started Completed

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [] Air [] Artesian Yield gal/min Drawdown Drill stem at Time

(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. WWC Number Date

Temperature of water 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:

(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. WWC Number Date

STATE OF OREGON WATER WELL REPORT

(as required by ORS 537.765)

JUN 2 1995

(START CARD) #

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

SALEM, OREGON

(1) OWNER: John Cuthbert, Well Number, Name, Address 103502 Sandridge Rd., City LA GRANDE, State Oregon, Zip 97850

(2) TYPE OF WORK: New Well, Deepening, Alteration, Abandonment

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

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

(5) BORE HOLE CONSTRUCTION: Special Construction approval, Depth of Completed Well, Explosives used

HOLE SEAL: Diameter, From, To, Material, Sacks or pounds, How was seal placed, Backfill placed from, Gravel placed from

(6) CASING/LINER: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

(7) PERFORATIONS/SCREENS: Perforations, Screens, Method, Type, Material, Slot size, Number, Diameter, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour, Pump, Bailer, Air, Artesian, Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water, Depth Artesian Flow Found, Was a water analysis done, Did any strata contain water not suitable for intended use, Salty, Muddy, Odor, Colored, Other, Depth of strata

(9) LOCATION OF WELL by legal description: County, Latitude, Longitude, Township, N or S Range, E or W. WM., Section, 1/4, 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well

(10) STATIC WATER LEVEL: ft. below land surface, Date, Artesian pressure, lb. per square inch, Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation

Well Log Table with columns: Material, From, To, SWL. Includes handwritten entries like 'CINDERS-Red + GREEN CLAY', 'GREEN CLAY + BLACK BASALT', etc.

Date started, Completed

(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.

(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.

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

JUN 22 1995

(START CARD) # _____

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT. SALEM, OREGON

(1) OWNER: _____ Well Number _____

Name John Cuthbert
Address 63502 Sand Ridge Rd.
City LA GRANGE State Oregon Zip 97130

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

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

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

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

Table with columns: HOLE Diameter, SEAL From, To, Material, From, To, Sacks or pounds

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

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Tele/pipe size, Casing, Liner

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

Temperature of water 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 Latitude Longitude
Township N or S Range E or W. WM.
Section 1/4 1/4
Tax Lot Lot Block Subdivision
Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:
ft. below land surface. Date
Artesian pressure lb. per square inch. Date

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

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:
Ground Elevation

Table with columns: Material, From, To, SWL
Handwritten entries: GREEN CLAY + BLACK BASALT 2345 2356, BLACK BASALT + GREEN CLAY 2356 2361, GREEN CLAY + BLACK BASALT 2361 2369, GREEN CLAY - BROWN + GREY 2369 2380, GREEN CLAY + BLACK BASALT 2380 2399, CLAY - GREEN + GREY 2399 2456, GREEN CLAY + BLACK BASALT 2456 2461, GREEN CLAY - BROWN + GREY 2461 2482, CLAY - GREY + HARD 2482 2497, CLAY - GREEN + GREY 2497 2510, GREEN CLAY + BLACK BASALT 2510 2515, BLACK BASALT - GREEN CLAY 2515 2519, CLAY - GREEN + BROWN - SOFT 2519 2531, CLAY - GREEN + SHALE 2531 2549, GREEN SHALE - HARD CLAY 2549 2572, GREEN CLAY - SOFT 2572 2594, GREEN CLAY - BASALT + 2594 2596, GREEN CLAY - GRAY + BROWN 2596 2625

Date started Completed

(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.
WWC Number
Signed Date

(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.
WWC Number
Signed Date

STATE OF OREGON WATER WELL REPORT

JUN 22 1995

(START CARD) #

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

WATER RESOURCES DEPT.

(1) OWNER: John Cuthbert Well Number SALEM, OREGON

(2) TYPE OF WORK: [] New Well [] Deepening [] Alteration [] Abandonment

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

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

(5) BORE HOLE CONSTRUCTION: Table with columns for HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds

How was seal placed: Method [] A [] B [] C [] D [] E Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns for Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

(7) PERFORATIONS/SCREENS: Table with columns for From, To, Slot size, Number, Diameter, Material, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [] Air [] Flowing Artesian

Temperature of water Depth Artesian Flow Found Was a water analysis done? Did any strata contain water not suitable for intended use?

(9) LOCATION OF WELL by legal description: County Latitude Longitude Township N or S Range E or W. WM. Section 1/4 1/4 Tax Lot Lot Block Subdivision Street Address of Well

(10) STATIC WATER LEVEL: ft. below land surface. Date Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns for From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation

WELL LOG Table with columns for Material, From, To, SWL

Stopped drilling because of caving in of the time. It didn't look promising for water at all. Well was air test at 2500' at about 50 GPM. With about 1000' SWL. had 1800 CFM of air to blow hole, it had 10" liner 1920-2120 + 8" dia from 2100' to 2400'. didn't stop it for

Date started Completed

(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.

(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.

JUN 2 2 1995

STATE OF OREGON WATER WELL REPORT

(as required by ORS 537.765) Instructions for completing this report are on the last page of this form.

(START CARD) #

SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County Latitude Longitude Township N or S Range E or W. WM. Section 1/4 1/4 Tax Lot Lot Block Subdivision Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:

ft. below land surface. Date Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found

Table with 4 columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Ground Elevation

Table with 4 columns: Material, From, To, SWL. Includes handwritten note: 'CAVING in all the time. We pulled out the 10" liner. WAS not able to get 8" out of the hole.'

Date started 2-11-92 Completed 5-5-94

(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.

WWC Number Signed Date

(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.

WWC Number 415 Signed Date 5-31-94

(1) OWNER: Well Number Name John Cathbert Address City State Zip

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

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

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

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

Table for HOLE and SEAL with columns: Diameter, From, To, Material, Sacks or pounds

How was seal placed: Method A B C D E Other

Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Table for Casing and Liner with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Table for Perforations and Screens with columns: From, To, Slot size, Number, Diameter, Material, Casing, Liner

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

Table for Well Tests with columns: Pump/Bailer/Air/Artesian, Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water Depth Artesian Flow Found Was a water analysis done? Did any strata contain water not suitable for intended use? Depth of strata: