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

10-06-2008

| WELL LABEL # L | 61805    |
|----------------|----------|
|                |          |
| START CARD#    | 100/1958 |

| (1) LAND OWNER Owner Well I.D.  | (9) LOCATION OF WELL (legal description)   |
|---|--|
| First Name DAVID Last Name MANUEL   | County Union Twp 4.00 S N/S Range 39.00 E E/W WM   |
| Company   | Sec <u>5</u> <u>SW</u> 1/4 of the <u>SW</u> 1/4 Tax Lot <u>901</u>   |
| Address PO BOX 1043   | Tax Map Number Lot   |
| City LA GRANDE State OR Zip 97850   | Lat or DMS or DD   |
| (2) TYPE OF WORK New Well Deepening Conversion  | Long or DMS or DD  |
| Alteration (repair/recondition) Abandonment   | Street address of well Nearest address   |
| (3) DRILL METHOD  | 66172 HWY 203 LA GRANDE HOT LAKE HOTEL   |
| Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other                                    | (10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)  |
| (4) PROPOSED USE Domestic Irrigation Community  | Existing Well / Predeepening   |
| Industrial/ Commercial Livestock Dewatering   | Completed Well 09-18-2008 9  |
| Thermal Injection Other   | Flowing Artesian? Dry Hole?  |
|   | WATER BEARING ZONES Depth water was first found  |
| (5) BORE HOLE CONSTRUCTION Special Standard Attach copy   |  |
| Depth of Completed Well ft.  BORE HOLE SEAL sacks/  | 09-18-2008 14 18 50 9  |
| BORE HOLE SEAL sacks/ Dia From To Material From To Amt lbs  |  |
|   |  |
|   |  |
|   | (11) WELL LOG Ground Elevation   |
| How was seal placed: Method A B C D E   | Material From To   |
| Other POURED DRY  | WELD UP 1 1/4" PITLESS HOLE 0 24   |
| Backfill placed from ft. to ft. Material  | EXTEND CASING UP 4FT 0 24 INSTALL 2" WELD-ON PITESS ADAPTER 0 24   |
| Filter pack from ft. to ft. Material Size   | GEAL WITH A 5 GAONG OF DENTIONITE  |
| Explosives used: Yes Type Amount  | RAISE GROUND LEVEL AROUND CASING 0 24  |
| 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 Material   |  |
| Perf/S Casing/ Screen Scrn/slot Slot # of Tele/creen Liner Dia From To width length slots pipe size | Date Started <u>09-18-2008</u> Completed <u>09-18-2008</u>   |
|   | (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.   |
| (8) WELL TESTS: Minimum testing time is 1 hour  | License Number Date  |
| Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)         | Electronically Filed Signed  |
| Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)  | (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 °F Lab analysis Yes By  | 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.  |
| Water quality concerns?   | License Number 1775 Date 10-06-2008  |
|   | Electronically Filed   |
|   | Signed JASON ACQUISTAPACE (E-filed)  |
|   | Contact Info (optional)  |