UNIO 52060

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

WELL LABEL # L	85259
START CARD #	193732

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)					
First Name Last Name	County UNION Twp 2 S N/S Range 38 E E/W WM					
Company TERRA MAGIC INC	Sec 3 NW 1/4 of the SE 1/4 Tax Lot 1000					
Address P.O. BOX 3093	Tax Map Number Lot					
City LaGRANDE State OR Zip 97850	Lat ° "or DMS or DD					
	Long o DMS or DD					
(2) TYPE OF WORK New Well Deepening Conversion	Street address of well • Nearest address					
Alteration (repair/recondition) Abandonment	(Street address of well (Nearest address					
(3) DRILL METHOD	1/4 MILE NORTH OF STANDLEY ON HUNTER ROAD					
Rotary Air Rotary Mud Cable Auger Cable Mud	40.00.00					
Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)					
	Existing Well / Predeepening					
(4) PROPOSED USE Domestic X Irrigation Community	Completed Well 12-10-2008 31					
Industrial/Commericial Livestock Dewatering	Flowing Artesian? X Dry Hole?					
Thermal Injection Other	WATER BEARING ZONES Depth water was first found					
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy						
Depth of Completed Well 1,200 ft.	12-10-2008 991 1,193 200 31					
BORE HOLE SEAL sacks/						
Dia From To Material From To Amt Ibs						
28 0 340 Cement 0 240 27 URD						
26 340 796 Cement 766 796 4 120						
16 796 1,200	(11) WELL LOG Ground Flevetion					
Umman alabata Matata Ct. Cp. Cc.	Glouid Elevation					
How was seal placed: Method A B C D E	Material From To TOP SOIL 0 3					
Other	BROWN CLAY, W/LAYERS OF SAND,GRAVEL 3 45					
Backfill placed from 240 ft. to 766 ft. Material High Solid Bentonite	SAND, BROWN CLAY LAYERS 45 449					
Filter pack from ft. to ft. Material Size	BLACK SANDSTONE W/SAND STREAKS 449 469					
Explosives used: Yes Type Amount	BROWN CLAY, SAND LAYERS 469 537					
(6) CASING/LINER	STICKY GREY CLAY W/SM SAND LAYERS 537 655					
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	STICKY GREY CLAY W/BURNT CLAY LAYER 655 748					
	HARD SILTSTONE W/ CLAY LAYERS 748 786					
	STICKY GREY CLAY 786 991					
	GREEN METAMORPHIC POWDER RIVER VOLCANIC'S AS PER DOGMI 991 993					
	SILTSTONE 993 997					
	GREEN METAMORPHIC POWDER RIVER					
Shoe Inside Outside Other Location of shoe(s)	VOLCANIC'S PER DOGMI 997 1,193					
Temp casing Yes Dia From To	BROWN & GREY ASH 1,193 1,200					
(7) PERFORATIONS/SCREENS						
Perforations Method						
Screens Type Johnson CS-W41 Material LCS						
Perf/S Casing/Screen Scrn/slot Slot # of Tele/ creen Liner Dia From To width length slots pipe size	Date Started 06-04-2008 Completed 12-10-2008					
Screen 10 998 1,198 .04	(unbonded) Water Well Constructor Certification					
330 1,170	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 1764 Date 12-29-2008					
Pump Bailer Air Flowing Artesian	Password : (if filing electronically)					
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed VV X					
200	(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 65 °F Lab analysis Yes By	performed during this time is in compliance with Oregon water supply well					
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best-of my knowledge and belief.					
From To Description Amount Units	License Number 1505 Date 12-29-2008					
	Password : (if filing electronically)					
	Signed Control of Control					
WATER RESOURCES DEP!	Contact Info (optional)					
ORIGNAL MATTER APPOURCES DEPARTMENT OF THE WATER RESOURCES DEPARTMENT OF THE WATER RESOURCES DEPARTMENT OF THE WATER RESOURCES DEPARTMENT.	EPARTMENT (ENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.89					

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WATER SUPPLY WELL REPORT - continuation page

WELL I.D. # L	85259
START CARD:	# 103733

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(6) C	ASIN	IG/LI	NER						(11) WELL						
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SALEM, OREGON