

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

05-07-2009

WELL LABEL # L 85262 LOST! REPL: L 134441

START CARD # 1006339

(1) LAND OWNER Owner Well I.D. First Name MARK Last Name DELINT Company DELINT FARMS Address 65324 ALICEL LANE City COVE State OR Zip 97824

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

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

(4) PROPOSED USE [] Domestic [X] Irrigation [] Community [] Industrial/ Commercial [] Livestock [] Dewatering [] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy) Depth of Completed Well 840.00 ft. BORE HOLE table with columns Dia, From, To, Material, SEAL, Amt, lbs.

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other Dry Pour Backfill placed from 40 ft. to 850 ft. Material Gravel Size pea gravel Explosives used: [] Yes Type Amount

(6) CASING/LINER table with columns 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 Wire Wrap Material M.S.

Table with columns: Perf/S creen, Casing/ Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Flowing Artesian Yield gal/min 150 Drawdown 300 Drill stem/Pump depth 300 Duration (hr) 1

Temperature 68 °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 Union Twp 2.00 S N/S Range 39.00 E E/W WM Sec 17 SW 1/4 of the NW 1/4 Tax Lot 7300 Tax Map Number Lot Lat Long [] Street address of well [X] Nearest address

CASE RD (1 MILE S ON, FROM INTERSECTION OF CASE ROAD AND ALICEL LN

(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft) Existing Well / Predeepening Completed Well 04-28-2009 11 Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 26 Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft)

(11) WELL LOG Ground Elevation Material From To Top Soil 0 4 Sandy Loam 4 20 Fine - Med Sand 20 23 Brown Clay 23 26 Med Sand 26 28 Brown Clay 28 38 Fine Sand 38 47 Grey Clay 47 54 Med Brown Sand w/ sm clay layers 54 114 Brown Clay 114 198 Med Brown Sand 198 204 Brown Clay 204 239 Fine - Coarse Sand some pea gravel w/sm clay layers 239 350 Grey Sticky Clay 350 413 Fine Black Sand 413 418 Grey Clay 418 539 Fine - Med Black Sand w/ sm clay layer 539 548 Grey Clay 548 573 Fine Black Sand 573 577

Date Started 03-06-2009 Completed 04-24-2009

(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 Date Electronically Filed 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 1505 Date 05-07-2009 Electronically Filed Signed TERRY DAUGHERTY (E-filed) Contact Info (optional)



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301
 (503) 986-0900
 www.oregon.gov/owrd

Application for Well ID Number

RECEIVED

JUN 28 2019

Do not complete if the well already has a Well Identification Number.

OWRD

I. OWNER INFORMATION

Current Owner Name (please print): DE LINT FARMS
 Mailing Address: 65324 ALICEL LANE
 City, State, Zip: COVE, OREGON, 97824
 Mail Well ID to: SAME AS ABOVE In Care Of (C/O)
 Name & Address: MARC DE LINT
 City, State, Zip: 64154 CASE ROAD, COVE, OREGON 97824-8407

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 2 S (North / South) Range: 39 E (East / West) Section: 17 SW 1/4 of the NW 1/4
 Tax Lot (usually last 3-5 numbers of Tax Map #): 7300 County UNION
 GPS Coordinates: 1 mile south of the intersection of Alicel Lane and Case Road
 Street Address of Well, City: ↪
 If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): IRRIGATION
 Date Well Constructed (or property built): 4/24/2009 Total Well Depth: 850' Casing Diameter: 16"
 Owner at time the well was constructed (if known): DE LINT FARMS Well Report # (if known): UNIO 52081
 Other Information: Tag is either covered by concrete or removed, no tag visible on well.

SUBMITTED BY (please print): GREGORY T BLACKMAN CWRE
 PHONE: 541-786-2859 EMAIL &/or FAX: gtblackman@yahoo.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

*Tag # L85262 lost! — * Replacement tag! **

For Official Use Only by the Oregon Water Resources Department:		
Received Date: <u>6-28-19</u>	Well Report Number: <u>UNIO 52081</u>	Well Identification #: <u>L-134441</u>