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

## **UNIO 52292**

Unio 52292		
WELL LABEL # L	96339	

**START CARD #** 1012492

(1) LAND OWNER Owner Well I.D. ROCK	(9) LOCATION OF WELL (legal description)		
First Name Last Name	County UNION Twp 5 S N/S Range 39 E E/W WM		
Company Heffernan Family Trust	Sec 27 NW 1/4 of the SW 1/4 Tax Lot 3200		
Address 706 B Ave	Tax Map Number Lot		
City LaGrande State OR Zip 97850	Lat ° "or 0 DMS or DD		
(2) TVDF OF WORK Way Well Describe Commission	Long or DD DMS or DD		
(2) TYPE OF WORK New Well Deepening Conversion  Alteration (repair/recondition) Abandonment	Street address of well Nearest address		
(3) DRILL METHOD	63600 View Point Lane, North Powder OR 97867		
Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)		
	Existing Well / Predeepening		
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 04-08-2011 1		
Industrial/Commercial 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 310 ft.	SWL Date   From   To   Est Flow   SWL(psi)   + SWL(ft)		
BORE HOLE SEAL sacks/	313 3,500		
Dia From To Material From To Amt Ibs			
20   0   230   Cement   5   230   200   S			
15 230 310 Bentonite Chips 0 5 20 S			
13 230 310 Benome emps 0 3 20 3			
	(11) WELL LOG Ground Elevation		
How was seal placed: Method A B C D E	Material From To		
XOther bent chips	Black & grey sticky clay 0 9		
Backfill placed fromft. toft. Material	Course sand 9 16		
Filter pack from ft. to ft. Material Size	Sand with clay 16 31		
	Blue sticky clay 31 77		
Explosives used: Yes Type Amount	Brown clay & fine sand 77 85		
(6) CASING/LINER	Grey clay & fine sand 85 102		
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Blue grey soft super sticky clay 102 183		
	Red & black cinders 183 220		
	Black med basalt 220 235		
	Black broken vesicular basalt & thin voids 235 252		
	Void-big water 252 264		
	Black, red broken vesicular basalt 264 284		
	Black red extremely broken basalt 284 313		
Shoe Inside Outside Other Location of shoe(s)	caving 310-313		
Temp casing Yes Dia From To			
(7) PERFORATIONS/SCREENS	5-3-11 2.4 psi at well head		
Perforations Method			
Screens Type Material			
Perf/S Casing/ Screen Scrn/slot Slot # of Tele/	Date Started 03-25-2011 Completed 04-01-2011		
creen Liner Dia From To width length slots pipe size	Date Started 03-25-2011 Completed 04-01-2011		
	(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.		
(0) WELL TROTO NO.			
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1934 Date 04-11-2011		
Pump	Password : (if filing electronically) Signed		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed party		
4,400 10' Dump	(bonded) Water Well Constructor Certification		
6,000 AiR / 310 4	I accept responsibility for the construction, deepening, alteration, or abandonment		
	work performed on this well during the construction dates reported above. All work		
Temperature 51 °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 1293 Date 04-11-2011		
	Password: (if filing electronically)		
	Signed / /w Hauser RECEVED		
	Contact Info (optional)		

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City LaGrande State OR Zip 97850	Lat or 0 DMS or DD		
(2) TYPE OF WORK X New Well Despening Conversion	Long Or 0 DMS or DD		
Alteration (repeig/recondition) Abandonment	Stroot uddress of well ( Noarest address		
	63600 View Point Lane, North Powder OR 97867		
(3) DRILL METHOD			
Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other	(10) STATIC WATER LEVEL Dete SWL(DS) + SWL(D)		
	Dete SWL(psi) + SWL(ft)  Existing Well / Predoppening		
(4) PROPOSED USE Domestic Imagesion Community	Complesed Well 04-08-2011 1		
Industrial Commercial Livestock Downtering	Plowing Artesian? X Dry Hole?		
Thermal Injection Other	WATER BEARING ZONES Depth water was first found		
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	SWL Date From To Est Flow SWL(psi) + SWL(ft)		
Depth of Completed Well 310 ft.	04-01-2011 235 313 6,000 X 2.5		
BORE HOLE SEAL sacks/ Dia From To Material From To Amt lbs			
Dia From To Material From To Amt lbs   20 0 230   Coment 5 230 200   S			
15 230 310 Bentonite Chips 0 5 20 S			
	(11) WELL LOG		
CHOURT EXCENDE			
How was seal placed: Method A B C D E	Material From To  Black & grey sticky clay 0 9		
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Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material Size	Sand with clay 16 31		
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Shoe Inside Outside Other Location of shoe(s)	ceving 310-313		
Temp casing Yes Dia Prom To			
(7) PERFORATIONS/SCREENS			
Perforations Method			
Screens Type Certalock Material PVC			
Perf/S Casing/ Screen Scrn/alot Slot # of Tele/	Date Started 03-25-2011 Completed 04-01-2011		
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	the best of my knowledge and belief.		
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1934 Date 04-11-2011		
Pump Bailer	Password: (if filing electronically) Signed		
Yield gal/min Drawdown Drill alem/Pumo depth Duration (hr)			
6,000 310 4	(bonded) Wafer Well Constructor Certification		
I accept responsibility for the construction, deepening, alteration, or abandonms work performed on this well during the construction dates reported above. All we			
Temperature 51 °F Lab analysis Tyes By performed during this time is in compliance with Oregon water supply			
Water quality concerns? Yes (describe below)			
From To Description Amount Units	License Number 1293 Date 04-11-2011		
	Password (diffling electronically) Signed		
	Signed (Optional)		
OBICINAL WATER RECORDES IN			

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

"RECEIVED

APR 1 4 2011