

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

WELL LABEL # L 96339

START CARD # 1016183

(1) LAND OWNER Owner Well I.D. Rock I

First Name Last Name
Company Heffernan Family Trust
Address 706 B Ave
City LaGrande State or Zip 97850

(2) TYPE OF WORK [] New Well [X] 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 757 ft.

Table with columns: Dia, From, To, Material, SEAL From, To, Amt, sacks/lbs. Rows include Cement and Bentonite Chips.

How was seal placed: Method [] A [X] B [] C [] D [] E

[X] Other bent chips

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: [] Yes Type Amount

(6) CASING/LINER

Table with columns: Casing Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd. Includes a diagram of casing sections.

Shoe [] Inside [] Outside [] Other Location of shoe(s)

Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type Material

Perforations From To Scm/slot width Slot length # of slots Tele/ pipe size

Table for perforations with columns: From, To, Scm/slot width, Slot length, # of slots, Tele/ pipe size. Includes a 'RECEIVED' stamp.

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

[X] Pump [] Bailer [] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Rows show test results.

Temperature 51 °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 5 S N/S Range 39 E E/W WM
Sec 27 NW 1/4 of the SW 1/4 Tax Lot 3200
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [X] Nearest address

63600 View Point Lane North Powder OR. 97867

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Rows for Existing Well / Predeepening and Completed Well.

Flowing Artesian? [X] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 235'

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Rows show water bearing zones.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Lists geological layers like black & red vic. rock med-soft, grey & black basalt hard, etc.

Date Started 04-11-2012 Completed 04-20-2012

(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 are true to the best of my knowledge and belief.

License Number Date
Password : (if filing electronically)
Signed MAY 18 2012

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment of 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.

License Number 1934 Date 04-27-2012
Password : (if filing electronically)
Signed
Contact Info (optional)

UNIO 52347

**WATER SUPPLY WELL REPORT -
continuation page**

WELL I.D. # L 96339
START CARD # 1016183

(5) BORE HOLE CONSTRUCTION

BORE HOLE			SEAL			sacks/ lbs
Dia	From	To	Material	From	To	

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

(7) PERFORATIONS/SCREENS

Perf/S reen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

Water Bearing Zones

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)

(11) WELL LOG

Material	From	To
grey& black very hard basalt fractured	476	479
red& black med. basalt porous	479	507
grey very hard basalt& little blue claystone	507	526
grey hard basalt& grey clay	526	537
black& red vis. med basalt& blue claystone	537	540
grey hard fractured basalt& grey blue claystone	540	549
black& grey fractured basalt& blue clay	549	555
brown porous basalt& light green claystone	555	556
grey very hard basalt	556	560
black& grey vis.soft basalt& little green claystone	560	565
blue green sticky clay soft	565	570
black vis.basalt& greenish blue claystone	570	573
black brown weathered broken rock soft	573	578
black grey weathered broken &blueish claystone	578	583
grey basalt hard&blue green claystone	583	599
brown vis.soft basalt& yellow claystone	599	602
red vis.soft basalt white seams&yellow claystone	602	605
black brown grey fractured vis. soft basalt	605	609
red vis. soft basalt	609	614
red and black fractured basalt& blue claystone	614	627
grey black brown fractured basalt	627	665
black grey vis. soft basalt	665	673
grey clay going to greenish grey clay soft	673	675
black soft scoria	675	679
rotton black rock& tan clay	679	681
tan& brown claystone going into sand stone	681	691
black broken vis. basalt&blue claystone	691	718
black soft scoria	718	722
brown sticky clay	722	731

Comments/Remarks

course brown sand	731-734
black scoria broken soft black basalt	734-736
sandy blue clay& fue black rocks	736-746
sticky grey clay	746-748
blue claystone& blue sticky clay	748-753
blue clay caving &weathered brown grey hard rock	753-764

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MAY 18 2012

WATER RESOURCES DEPT
SALEM, OREGON

WATER RESOURCES DEPT
SALEM, OREGON

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

WELL LABEL # L 96339

START CARD # 1016183

(1) LAND OWNER Owner Well I.D. Rock 1

First Name _____ Last Name _____
 Company Heffernan Family Trust
 Address 706 B Ave
 City LaGrande State or Zip 97850

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

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

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

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 757 ft.

BORE HOLE			SEAL			sacks/ lbs	
Dia	From	To	Material	From	To	Amt	lbs
20	0	230	Cement	5	230	200	S
15	230	310	Bentonite Chips	0	5	20	S
14.75	310	750					
12.25	750	764					

How was seal placed: Method A B C D E

Other bent chips

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	16	<input checked="" type="checkbox"/>	3	230	.375	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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	Dia	From	To	Scrns/slot	Slot	# of	Tele/
creen	Liner	Dia	From	To	width	length	slots	pipe size	

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
4,400	10		1
6,000		310	4

Temperature 51 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County UNION Twp 5 S N/S Range 39 E E/W WM

Sec 27 NW 1/4 of the SW 1/4 Tax Lot 3200

Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD

Long _____ " or _____ DMS or DD

Street address of well Nearest address

63600 View Point Lane North Powder OR. 97867

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+ SWL(ft)
Existing Well / Predeepening	04-11-2012	1	<input checked="" type="checkbox"/> 2.3
Completed Well	04-20-2012	1	<input checked="" type="checkbox"/> 2.3

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found _____

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
04-11-2012	337	341	6,000	1	
04-11-2012	389	410	6,000	1	
04-11-2012	422	476	6,000	1	
04-12-2012	537	556	6,000	1	
04-14-2012	563	757	6,000	1	

(11) WELL LOG

Ground Elevation _____

Material	From	To
black & red vic. rock med-soft	313	316
grey & black basalt hard, little blue claystone	316	337
red vic. soft	337	340
brown & black med. basalt	340	341
brown & grey hard basalt	341	354
blue claystone soft	354	362
grey hard basalt & blue claystone	362	373
broken brown med. basalt & blue claystone	373	389
red & black vic. broken basalt	389	398
brown soft basalt, porous	398	405
red vic. soft basalt & blue-green claystone	405	410
grey & brown hard basalt	410	416
grey & brown hard basalt & blue claystone	416	422
brown vic. med basalt & blue claystone	422	428
grey & red vic. soft basalt & blue claystone	428	431
black & brown vic. soft basalt & blue claystone	431	436
black vic. fractured soft basalt & blue claystone	436	452
black & brown vic. soft basalt & blue claystone	452	464
black & grey vic. soft basalt/ brown seams	464	476

Date Started 04-11-2012 Completed 04-20-2012

(unbonded) Water Well Constructor Certification

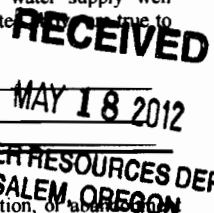
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License Number _____ Date _____
 Password: (if filing electronically) _____
 Signed _____

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(5) BORE HOLE CONSTRUCTION

BORE HOLE			Material	SEAL		sacks/ lbs
Dia	From	To		From	To	

FILTER PACK

From	To	Material	Size

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Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

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black& grey fractured basalt& blue clay	549	555
brown porous basalt& light green claystone	555	556
grey very hard basalt	556	560
black& grey vis.soft basalt& little green claystone	560	565
blue green sticky clay soft	565	570
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