

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

MAY 05 2014

APR 14 2014

SALEM, OR

SALEM, OR

WELL LABEL # L 100224

START CARD # 1022239

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

First Name Steve Last Name Delashmutt
Company MDB Farms LLC
Address 61070 Pierce Rd
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 478 ft.

| BORE HOLE | | | SEAL | | | sacks/ | |
|-----------|------|-----|-----------------|------|----|--------|-----|
| Dia | From | To | Material | From | To | Amt | lbs |
| 24 | 0 | 525 | Bentonite Chips | 0 | 50 | 10,000 | P |
| | | | | | | | |
| | | | | | | | |

How was seal placed: Method A B C D E

Other Dry pour

Backfill placed from 50 ft. to 120 ft. Material 3/8" pea gravel

Filter pack from 120 ft. to 480 ft. Material Sand Size 8/16

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

| Casing Liner | Dia | + | From | To | Gauge | Stl | Plstc | Wld | Thrd |
|-------------------------------------|-----|---|------|-----|-------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/> | 16 | | 2 | 146 | .375 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | 16 | | 206 | 255 | .375 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | 16 | | 265 | 355 | .375 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | 16 | | 365 | 380 | .375 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input type="checkbox"/> | 16 | | 390 | 410 | .375 | <input type="checkbox"/> | <input type="checkbox"/> | <input checked="" 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 Wire Wrap Material Stainless Steel

| Perf/ Screen | Casing/ Liner | Screen Dia | From | To | Scrn/slot width | Slot length | # of slots | Tele/ pipe size |
|--------------|---------------|------------|------|-----|-----------------|-------------|------------|-----------------|
| Screen | Casing | 16 | 146 | 206 | .03 | | | |
| Screen | Casing | 16 | 255 | 265 | .03 | | | |
| Screen | Casing | 16 | 355 | 365 | .03 | | | |
| Screen | Casing | 16 | 380 | 390 | .03 | | | |
| Screen | Casing | 16 | 410 | 420 | .03 | | | |

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

Pump Bailer Air Flowing Artesian

| Yield gal/min | Drawdown | Drill stem/Pump depth | Duration (hr) |
|-----------------|----------|-----------------------|---------------|
| 150 cat. | | 300 | 1 |
| | | | |
| | | | |

Temperature 66 °F Lab analysis Yes By _____

Water quality concerns? Yes (describe below)

| From | To | Description | Amount | Units |
|------|----|-------------|--------|-------|
| | | | | |
| | | | | |

(9) LOCATION OF WELL (legal description)

County UNIO Twp 3 S N/S Range 38 E E/W WM
Sec 12 NE 1/4 of the NE 1/4 Tax Lot 2400
Tax Map Number _____ Lot _____
Lat _____ " or 45.325833 DMS or DD
Long _____ " or -117.99475 DMS or DD
 Street address of well Nearest address

2,674 Feet South of Cove Highway and 5,026 Feet East of Pierce Rd

(10) STATIC WATER LEVEL

| Existing Well / Predeepening | Date | SWL(psi) | + SWL(ft) |
|------------------------------|------------|----------|-----------|
| Completed Well | 03-25-2014 | | 74 |

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found 74

| SWL Date | From | To | Est Flow | SWL(psi) | + SWL(ft) |
|------------|------|-----|----------|----------|-----------|
| 03-13-2014 | 74 | 90 | | | 74 |
| 03-14-2014 | 99 | 112 | | | 74 |
| 03-15-2014 | 118 | 206 | | | 74 |
| 03-16-2014 | 237 | 241 | | | 74 |
| 03-16-2014 | 255 | 263 | | | 74 |

(11) WELL LOG

Ground Elevation _____

| Material | From | To |
|---------------------------------------|------|-----|
| Top soil | 0 | 6 |
| Brown clay | 6 | 19 |
| Gravel | 19 | 48 |
| Tan clay | 48 | 53 |
| Gravel | 53 | 90 |
| Brown clay | 90 | 99 |
| Gravel | 99 | 112 |
| Brown clay | 112 | 118 |
| Fine - coarse sand, gravel | 118 | 206 |
| Grey clay | 206 | 212 |
| Blue clay | 212 | 237 |
| Med blue sand | 237 | 241 |
| Hard blue clay | 241 | 245 |
| Sandy blue clay | 245 | 255 |
| Fine - med blue sand | 255 | 263 |
| Blue clay | 263 | 291 |
| Fine blue sand | 291 | 294 |
| Blue clay, soft sandstone | 294 | 323 |
| Fine - med blue sand, clay, sandstone | 323 | 343 |

Date Started 03-12-2014 Completed 03-25-2014

(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.

License Number _____ Date _____
Password : (if filing electronically) _____
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. 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 1505 Date 04-07-2014
Password : (if filing electronically) _____
Signed _____
Contact Info (optional) _____

APR 14 2014

WATER SUPPLY WELL REPORT - continuation page

SALEM, OR

WELL I.D. # L 100224

START CARD # 1022239

(5) BORE HOLE CONSTRUCTION

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

FILTER PACK

| From | To | Material | Size |
|------|----|----------|------|
| | | | |
| | | | |
| | | | |

(6) CASING/LINER

| Casing Liner | Dia | + | From | To | Gauge | Stl | Plstc | Wid | Thrd |
|-------------------------------------|-----|--------------------------|------|-----|-------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| <input checked="" type="checkbox"/> | 16 | <input type="checkbox"/> | 420 | 435 | .375 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | 16 | <input type="checkbox"/> | 445 | 453 | .375 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| <input checked="" type="checkbox"/> | 16 | <input type="checkbox"/> | 473 | 478 | .375 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
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(7) PERFORATIONS/SCREENS

| Perf/ Screen | Casing/ Liner | Screen Dia | From | To | Sern/ slot width | Slot length | # of slots | Tele/ pipe size |
|--------------|---------------|------------|------|-----|------------------|-------------|------------|-----------------|
| Screen | Casing | 16 | 435 | 445 | .03 | | | |
| Screen | Casing | 16 | 453 | 473 | .03 | | | |
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(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) |
|------------|------|-----|----------|----------|-----------|
| 03-17-2014 | 291 | 294 | | | 74 |
| 03-18-2014 | 323 | 343 | | | 74 |
| 03-18-2014 | 357 | 363 | | | 74 |
| 03-18-2014 | 380 | 385 | | | 74 |
| 03-19-2014 | 412 | 417 | | | 74 |
| 03-20-2014 | 435 | 439 | | | 74 |
| 03-21-2014 | 457 | 465 | | | 74 |
| 03-22-2014 | 467 | 470 | | | 74 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

(11) WELL LOG

| Material | From | To |
|----------------------------------------|------|-----|
| Burnt, hard, and sticky blue clays | 343 | 357 |
| Fine blue sand | 357 | 363 |
| Sticky blue clay | 363 | 380 |
| Fine blue sand | 380 | 385 |
| Sticky and sandy blue clays, sandstone | 385 | 412 |
| Fine - med blue sand | 412 | 417 |
| Blue siltstone, sandstone | 417 | 435 |
| Fine - med blue sand | 435 | 439 |
| Blue clay, sandstone, siltstone | 439 | 445 |
| Dark grey clay | 445 | 457 |
| Fine - med blue sand | 457 | 465 |
| Blue clay | 465 | 467 |
| Fine - med blue sand | 467 | 470 |
| Blue, grey clays | 470 | 525 |
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Comments/Remarks

[Empty box for comments/remarks]