UNIO 52490

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

WELL LABEL # L 96346

START CARD # 1020763

(1) LAND OWNER

Owner Well I.D. Burkel #3

First Name _____ Last Name _____

Company 5-D Farms

Address PO Box 456

City Pasco State WA Zip 99301

(2) TYPE OF WORK

[X] New Well [ ] Deepening [ ] Conversion
[ ] Alteration (repair/recondition) [ ] Abandonment

(3) DRILL METHOD

[X] Rotary Air [X] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other _____

(4) PROPOSED USE

[ ] Domestic [X] Irrigation [ ] Community
[ ] Industrial/ Commericial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other _____

(5) BORE HOLE CONSTRUCTION

Special Standard [ ] Attach copy

Depth of Completed Well 673 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/ lbs
24	0	285	Cement	0	285	243	S
19	285	712					

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

[ ] Other _____

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
●		20	X	1.5	285	.375	●		X	

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

Temp casing [ ] Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type _____ Material _____

Perf/S creen	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

( ) Pump ( ) Bailer (●) Air ( ) Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
200		600	2

Temperature 51 °F Lab analysis [ ] Yes By _____

Water quality concerns? [ ] Yes (describe below)

From	To	Description	Amount	Units

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(9) LOCATION OF WELL (legal description)

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

Sec 20 SE 1/4 of the NE 1/4 Tax Lot 2500

Tax Map Number _____ Lot _____

Lat ° ' " or 45.11698 DMS or DD

Long ° ' " or 117.95724 DMS or DD

( ) Street address of well (●) Nearest address

Ladd canyon, North powder OR

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening				
Completed Well	09-18-2013			1

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES Depth water was first found 565

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
09-18-2013	565	580	200			1

(11) WELL LOG

Ground Elevation 1,845

Material	From	To
Black clay	0	10
Brown stickey clay	10	30
Brown stickey clay w/ decomposing gravels	30	42
Brown stickey clay	42	150
Tan stickey clay	150	160
Blue stickey clay	160	185
Brkn vesicular rock	185	190
Rock getting harder	190	204.5
Brown stickey clay	204.5	207
Brkn vesicular rock	207	212
Brown rock w/ vesicular black and red	212	215
Rock getting harder and turning grey	215	220
Hard grey rock	220	240
Hard grey rock, a little brkn	240	245
Hard grey rock, more brkn	245	252
Red ves rock and tan claystone	252	269
Red clay	269	271
Brown and black basalt, med hard	271	275

Date Started 08-19-2013 Completed 09-18-2013

(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.

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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 1937 Date 12-02-2013

Password : (if filing electronically) ******

Signed _____

Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT 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 96346

START CARD # 1020763

(5) BORE HOLE CONSTRUCTION

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

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

(7) PERFORATIONS/SCREENS

Perf/Screen	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
Hard grey basalt	275	289
Red badly brkn basalt	289	297
Dark brown brkn rock w/ some ves	297	315
Conglomerate soft	315	331
Conglomerate hard	331	347
Conglomerate med	347	375
brkn rock, soft	375	390
Tan claystone and soft brown rock	390	395
Tan claystone	395	419
Frac rock, little vesicular, harder with depth	419	497
Clay and rock	497	510
Frac rock, hard	510	565
Brkn rock, rough drilling, WB	565	580
Tan clay	580	590
Rust colored clay	590	684
Quartz boulders, pink and white	684	712

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Comments/Remarks

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