

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

UNIO 52714

10/18/2018

WELL I.D. LABEL# L 131376
START CARD # 1039853
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D.
First Name SAM Last Name BAKER
Company
Address 59257 HIGH VALLEY RD
City UNIO State OR Zip 97883

(2) TYPE OF WORK
New Well Deepening Conversion
Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal:

(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 TEST WELL

(5) BORE HOLE CONSTRUCTION
Special Standard (Attach copy)
Depth of Completed Well 600.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, sacks/lbs. Rows include Bentonite and Calculated values.

How was seal placed: Method A B C D E
Other POURED DRY

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: Yes Type Amount

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount 10000.00 Pounds Actual Amount 10225.00 Pounds

(6) CASING/LINER
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 Material
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen 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)

Temperature 63 °F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 77 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County UNIO Twp 4.00 S N/S Range 40.00 E E/W WM
Sec 22 SW 1/4 of the NW 1/4 Tax Lot 4501
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
Street address of well Nearest address

59257 HIGH VALLEY RD
UNIO, OR 97883

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 8/9/2018 22 50.8
Flowing Artesian? Dry Hole?

Table: WATER BEARING ZONES. Columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Rows show data for 8/8/2017, 8/8/2017, and 8/9/2018.

(11) WELL LOG
Ground Elevation
Material From To
SOIL 0 2
BROWN CLAY, GRAVEL, BROKEN ROCK 2 12
BASALT, BROWN, FRACTURED 12 44
BASALT, TAN, FRACTURED 44 56
BASALT, BROWN 56 63
BASALT, GRAY, FRACTURED 63 108
BASALT, BROWN, FRACTURED 108 125
BASALT, TAN, FRACTURED 125 149
BASALT, BROWN, FRACTURED 149 157
RED CINDERS, FRACTURED BASALT 157 168
BASALT, BROWN CLAY, FRACTURED 168 192
BASALT, TAN, FRACTURED 192 204
BASALT, GRAY/GREEN, FRACTURED 204 214
BASALT, BROWN/RED, FRACTURED 214 228
BASALT, TAN, RED CINDERS, FRACTURED 228 241
BASALT, GRAY/GREEN, FRACTURED 241 254
BASALT, BROWN, FRACTURED 254 277
BASALT, TAN, FRACTURED 277 319
BASALT, TAN, RED CINDER, FRACTURED 319 329

Date Started 8/8/2018 Completed 10/4/2018

(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 1964 Date 10/16/2018

Signed REESE ACQUISTAPACE (E-filed)

(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 1775 Date 10/18/2018

Signed JASON ACQUISTAPACE (E-filed)

Contact Info (optional)

