

STATE OF OREGON
WATER SUPPLY WELL REPORT

UNIO 53118

WELL I.D. LABEL# L

155424

START CARD #

1081499

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

6/8/2026

(1) LAND OWNER

Owner Well I.D. _____

First Name ANDILast Name CAMP

Company _____

Address 3712 SE 8TH AVECity PORTLANDState ORZip 97202**(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☐ 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 134.00 ft.

BORE HOLE				SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs	
10	0	21	Bentonite Chips	0	20	14.5	S	
8	21	134			Calculated	10		
					Calculated			

Seal placement 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: ☐ Type _____ Amount _____Seal Placement Begin Date 6/5/2026 Begin Time 11 20**(5a) ABANDONMENT USING UNHYDRATED BENTONITE**

Proposed Amount _____

Actual Amount _____

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	6	☒	2	22	0.250	ST	☒		OUT.	22
L	4.5		6	134	Sch40	PL		☒		

Temp casing ☐ Yes Dia _____ From + ☐ _____ To _____**(7) PERFORATIONS/SCREENS**Perforations Method SKILL SAW

Screens Type _____ Material _____

Perf/	Casing/	Screen	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/
Screen	Liner								Pipe size
Perf	Liner		4.5	114	134	.25	6	48	

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	100		133	1

Temperature 59 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 80 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)County UNION Twp 2.00 S N/S Range 37.00 E E/W WMSec 35 SW 1/4 of the NW 1/4 Tax Lot 300

Tax Map Number _____ Lot _____

Lat _____ ° _____ ' _____ " or 45.34928873 DMS or DD

Long _____ ° _____ ' _____ " or -118.15533441 DMS or DD

☒ Street address of well ☐ Nearest address62112 LOWER PERRY LOOP, LA GRANDE, OR, 97850, USA**(10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	6/5/2026			52
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 90.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
6/4/2026	90	100	1			52
6/4/2026	100	120	16			52
6/4/2026	120	134	100			52

(11) WELL LOGGround Elevation 2933.96 FT

Material	From	To
BROWN CLAY, COBBLES	0	4
FRACTURED BASALT, BROWN CLAY	4	10
FRACTURED BASALT, BROWN CLAY, GRAVEL	10	63
FRACTURED BASALT, BROWN CLAY, RED CINDERS	63	78
FRACTURED BASALT, GREY CLAY	78	118
FRACTURED BASALT, BROWN CLAY, RED CINDERS	118	127
FRACTURED BASALT, CONGLOMERATE	127	134

Construction

Begin Date 6/3/2026 Begin Time 13 00 End Date 6/5/2026**(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 _____

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 2120 Date 6/8/2026Signed JORDAN GOODWIN (E-filed)Drilling Company: EARTH & WATER WORKS

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

UNIO 53118

6/8/2026

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 45.34928873 Datum: WGS84

Longitude: -118.1553441

Township/Range/Section/Quarter-Quarter Section:

WM2.00S37.00E35SWNW

Address of Well:

62112 LOWER PERRY LOOP, LA GRANDE, OR, 97850, USA

Well Label: 155424

Printed: June 8, 2026

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

