

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

07-20-2009

WELL LABEL # L 70755

START CARD # 1007140

(1) LAND OWNER Owner Well I.D. First Name BILL Last Name REEVES Company Address 1027 ROOT RD. City MOSIER State OR Zip 97040

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

(3) DRILL METHOD [] Rotary Air [] Rotary Mud [X] Cable [] Auger [] Cable Mud [] 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 622.00 ft.

BORE HOLE table with columns: Dia, From, To, Material, SEAL, Amt, lbs

How was seal placed: Method [] A [] 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 table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thr

Shoe [] Inside [] Outside [] Other Location of shoe(s) Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS Perforations Method Screens Type Material

Table with columns: Perf/S, Casing/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)

Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description) County Wasco Twp 2.00 N N/S Range 12.00 E E/W WM Sec 7 NE 1/4 of the NE 1/4 Tax Lot 100 Tax Map Number Lot Lat Long [X] Street address of well [] Nearest address

1027 ROOT RD. MOSIER, OR 97040

(10) STATIC WATER LEVEL table with columns: Date, SWL(psi), SWL(ft)

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft)

(11) WELL LOG table with columns: Material, From, To, Ground Elevation

Date Started 06-17-2009 Completed 07-02-2009

(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. License Number Date Electronically Filed 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. License Number 1821 Date 07-20-2009 Electronically Filed Signed MICHAEL BYRD (E-filed) Contact Info (optional)