

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

WASC 52152

WELL I.D. LABEL# L

114528
START CARD # 1022832
ORIGINAL LOG #

6/21/2014

(1) LAND OWNER

Owner Well I.D.
First Name BOB Last Name KREIN
Company
Address PO BOX 158
City MAUPIN State OR Zip 97037

(2) TYPE OF WORK

[X] New Well [ ] Deepening [ ] Conversion
[ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrld
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD

[X] Rotary Air [ ] Rotary Mud [ ] 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

Depth of Completed Well 416.00 ft. Special Standard [ ] (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 12, 0, 38, Bentonite Chips, 0, 38, 22, S. Row 2: 8, 38, 416.

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

[X] 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 Actual Amount

(6) CASING/LINER

Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrld. Row 1: 8, 2, 38, .250, [X], [ ], [X]. Row 2: 6, 0, 416, .188, [ ], [ ], [X].

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

Temp casing [ ] Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method AIR PERFERATOR

Screens Type Material

Table with columns: Perf/ Screen, Casing/ Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Row 1: 6, 339, 411, .125, 2, 1890.

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

[ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 100, 400, 1.

Temperature 55 °F Lab analysis [ ] Yes By

Water quality concerns? [ ] Yes (describe below) TDS amount

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

(9) LOCATION OF WELL (legal description)

County WASC Twp 5.00 S N/S Range 15.00 E E/W WM
Sec 2 NE 1/4 of the SE 1/4 Tax Lot 100
Tax Map Number Lot
Lat " or 45.16063889 DMS or DD
Long " or -120.89219444 DMS or DD
[ ] Street address of well [X] Nearest address

BAKE OVEN RD
MAUPIN ,OR

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Row 1: 6/18/2014, 230.

Flowing Artesian? [ ] Dry Hole? [ ]

WATER BEARING ZONES

Depth water was first found 330.00

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 6/17/2014, 330, 416, 100, 230.

(11) WELL LOG

Ground Elevation 2326.00

Table with columns: Material, From, To. Rows include CLAY, BASALT CLAY BROWN, BASALT GRAY, BASALT BROWN, BASALT GRAY, BASALT BROWN, BASALT BLACK GRAY, BASALT GRAY BROWN, BASALT GRAY, BASALT WEATHERED LAYER, BASALT GRAY FRACTURED VESICLAR LAYER, BASALT WEATHERED LAYERS.

Date Started 6/16/2014 Complete 6/18/2014

(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 758 Date 6/21/2014

Signed THOMAS R PECK (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 1720 Date 6/21/2014

Signed JACK ABBAS (E-filed)

Contact Info (optional)