

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

WELL I.D. LABEL# L
START CARD # 214478
ORIGINAL LOG #

5/17/2018

(1) LAND OWNER
Owner Well I.D.
First Name HOWARD Last Name HOUSTON
Company
Address 2630 OLD COLUMBIA RIVER RD
City HOOD RIVER State OR Zip 97031

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

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

(3) DRILL METHOD
Rotary Air Rotary Mud Cable Auger Cable Mud
Reverse Rotary Other ABANDONMENT

(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 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Includes rows for BORE HOLE and SEAL.

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

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount 2000.00Pounds Actual Amount 8000.00Pounds

(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 Scrm/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 F Lab analysis Yes By
Water quality concerns? Yes (describe below) TDS amount 120 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County wasco Twp 2.00 N N/S Range 11.00 E E/W WM
Sec 2 NE SE 1/4 of the SW SE 1/4 Tax Lot 200
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
Street address of well Nearest address

MOSIER MANOR

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

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Includes WATER BEARING ZONES.

(11) WELL LOG
Ground Elevation
Material From To
RECEIVED
JUN 18 2018
OWRD

Date Started 4/23/2018 Completed 4/25/2018

(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 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 1256 Date 5/17/2018
Signed KARL MOORE JR (E-filed)
Contact Info (optional) WILMA BENSON

