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

## WHEE 50331 07-24-2007

WELL LABEL # L 91166

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**START CARD #** 1001414

(1) LAND OWNER Owner Well I.D.1	
	(9) LOCATION OF WELL (legal description)
First Name CASEY Last Name SAFRENO	County Wheeler Twp 11.00 S N/S Range 24.00 E E/W WM
Company 4DSD,LLC	Sec $\frac{16}{16}$ SW $\frac{1}{4}$ of the SW $\frac{1}{4}$ Tax Lot $\frac{501}{14}$
Address  175 PHILLIP RD    City  WOODSIDE  State  CA  Zip  94062	Tax Map Number Lot
	Lat <u>4</u> °36 '948 " or <u>4.86333333</u> DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Long -119 °50 '89.000" or -119.85805556 DMS or DD
Alteration (repair/recondition)	Street address of well Nearest address
(3) DRILL METHOD	NON ASSIGNED WELL #1
Rotary Air    Rotary Mud    Cable    Auger    Cable Mud      Reverse Rotary    Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening
Industrial/ Commericial Livestock Dewatering	
Thermal Injection Other	
(5) BORE HOLE CONSTRUCTION Special Standard (Attach cop	
Depth of Completed Well <u>395.00</u> ft.	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
BORE HOLE SEAL sacks Dia From To Material From To Amt lbs	
12      0      19      Bentonite Chips      0      19      10      S	
8 19 395	
	(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D E	
Now was sear praced.  Method  I  I  I  I  I    Cother POURED DRY  I  I  I  I  I  I  I	MaterialFromToClaystone Brown025
	Claystone Green 25 40
Backfill placed from    ft. to    ft. Material      Filter pack from    ft. to    ft. Material	Claystone Brown 40 48
	Claystone Gray 48 85
Explosives used: Yes Type Amount	Claystone Green 85 98
(6) CASING/LINER	Claystone Brown 98 105
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Claystone Gray105112Claystone Brown112175
	Claystone Brown 112 175 Claystone Red 175 273
	Claystone Brown 273 304
	Claystone Red 304 322
	Claystone Gray 322 375
	Claystone Gray Fractured 375 395
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	Date Started      07-10-2007      Completed      07-11-2007
	(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.
(8) WELL TESTS: Minimum testing time is 1 hour	License Number 1831 Date 07-24-2007
Pump Bailer Air Flowing Artesian	Electronically Filed
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed ALLEN R PECK (E-filed)
400 395 1	(bonded) Water Well Constructor Certification
	I accept responsibility for the construction, deepening, alteration, or abandonmen
	work performed on this well during the construction dates reported above. All work
Temperature 65 °F Lab analysis Yes By	performed during this time is in compliance with Oregon water supply well
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.
From To Description Amount Units	License Number 1720 Date07-24-2007
	Electronically Filed Signed JACK ABBAS (E-filed)
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	Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

ORIGINAL - WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.88