

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

08-03-2008

WELL LABEL # L 91166

START CARD # 1003959

(1) LAND OWNER Owner Well I.D. 1
First Name CASEY Last Name SAFRENO
Company 4DSD,LLC
Address 175 PHILLIP RD
City WOODSIDE State CA Zip 94062

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

(3) DRILL METHOD
Rotary Air Rotary Mud Cable Auger Cable Mud
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 403.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, sacks/lbs. Row 1: 14, 0, 403, Cement, 0, 97, 55, S

How was seal placed: Method A B C D E
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

(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 Machine
Screens Type Material

Table with columns: Perf, Casing, Liner, 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 Wheeler Twp 11.00 S N/S Range 24.00 E E/W WM
Sec 16 SW 1/4 of the SW 1/4 Tax Lot 501
Tax Map Number Lot
Lat 44 36 948 or 44.86333333 DMS or DD
Long -119 50 89.000 or -119.85805556 DMS or DD
Street address of well Nearest address
NON ASSIGNED WELL #1

(10) STATIC WATER LEVEL
Table with columns: Date, SWL(psi), SWL(ft)
Existing Well / Predeepening 07-21-2008 6 13.9
Completed Well 07-24-2008 4 9.2
Flowing Artesian? Dry Hole?

WATER BEARING ZONES
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft)
07-21-2008 375 395 400 4 9.2

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

Date Started 07-21-2008 Completed 07-24-2008

(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 758 Date 08-03-2008
Electronically Filed
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.
License Number 1720 Date 08-03-2008
Electronically Filed
Signed JACK ABBAS (E-filed)
Contact Info (optional)