

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

438-9773
UMAT
6053

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JUL 25 1994

509-525-8790, Sprinkler 1/34
60N/35E/34
cb
(START CARD) # W-63747

Instructions for completing this report are on the last page of this form.

(1) OWNER:

Name Frank Ward

Address _____

City Milton - Free Water State OR Zip 97140

(2) TYPE OF WORK

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 363 ft.

Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
14 3/4"	0	33	P II Cement	3	33	22 sacks
10"	+2	270				
8"	270	363				

How was seal placed: Method A B C D E

Other trimming pipe

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 10"	+2	33	1/4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 8"	+2	350	1/4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 8" drive shoe 350

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian	Time
200+		350	<input checked="" type="checkbox"/>	1 hr.
135+		200	<input type="checkbox"/>	
30+		125	<input type="checkbox"/>	

Temperature of water 60°F Depth Artesian Flow Found _____

Was a water analysis done? Yes By whom _____

Did any strata contain water not suitable for intended _____

Salty Muddy Odor Colored Other _____

Depth of strata: _____

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(9) LOCATION OF WELL by legal description:

County Umatilla Latitude _____ Longitude _____
Township 6N N or S Range 35E E or W. WM. _____
Section 34 NW 1/4 SW 1/4 _____
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:

120 ft. below land surface. Date 7/18/94
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 58

From	To	Estimated Flow Rate	SWL
-58	-81	5	
-81	-208	20	
-208	-233	100+	45
-350	-363	200+	120

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Soil w/rock	0	9	
Cemented gravel	9	233	
Sand	233	269	
Blue Clay	269	348	
Broken Basalt	348	350	
Black w/Blue	350	363	120

Date started 7-6-94 Completed 7-18-94

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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.

Signed Greg Dennis WWC Number 1588 Date 7-18-94

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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.

Signed Fory Band WWC Number 544 Date 7-18-94

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6N/35E/34CB

STATE OF OREGON WATER WELL REPORT (as required by ORS 537.765)

5 UMAT 6366

WATER RESOURCES DEPT. (START CARD) # W-63747 SALEM, OREGON

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number Name FRANK WARD Address RT 2 BOX 54E City MILTON-FREEMER State OR Zip 97862

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

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, Material, SEAL From, To, Sacks or pounds. Row 1: PTD COM, 330, 350, 46 Sks

How was seal placed: Method [] A [] B [] C [] D [] E [] Other TREMIC Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing and Liner rows are crossed out.

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Material, Casing, Liner. Row 1 is crossed out.

(8) WELL TESTS: Minimum testing time is 1 hour. [] Pump [] Bailer [] Air [] Flowing Artesian. Yield gal/min, Drawdown, Drill stem at, Time.

Temperature of water, Depth Artesian Flow Found, Was a water analysis done? [] Yes By whom, Did any strata contain water not suitable for intended use? [] Too little, [] Salty [] Muddy [] Odor [] Colored [] Other, Depth of strata:

(9) LOCATION OF WELL by legal description: County umatilla Latitude Longitude Township 6N N or S Range 35 E or W. WM. Section 34 NW 1/4 SW 1/4 Tax Lot Lot Block Subdivision Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL: 120 ft. below land surface. Date 12-1-94 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 120

(12) WELL LOG: Ground Elevation

Table with columns: Material, From, To, SWL. Text: The 8 INCH LINER WAS PULLED BACK 20'. The EXPOSED CLAYSTONE WAS UNDERREAMED FROM 330' TO 350' TO A DIAMETER OF 10". The 10" HOLE WAS FILLED WITH PORTLAND CEMENT. The LINER WAS SET BACK TO THE ORIGINAL DEPTH OF 350'. The CEMENT WAS DRILLED OUT LEAVING ANY WATER FROM A HIGHER LEVEL UNABLE TO MOVE UP OR DOWN THE BORE HOLE.

Date started 11-22-94 Completed 12-1-94 (unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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. Signed PERRY STORHAMP WWC Number 1532 Date

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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. Signed Jany Burs WWC Number 544 Date

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