

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

UNPO  
0102

RECEIVED

FEB 13 1992

35/39E/30

(START CARD) # 33958

(1) **OWNER:** Name Fred Walkley Well Number: WATER RE  
 Address 65228 Airport Ln  
 City LA Grande State OR Zip 97750

(2) **TYPE OF WORK:**  
 New Well  Deepen  Recondition  Abandon

(3) **DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  
 Other

(4) **PROPOSED USE:**  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Other

(5) **BORE HOLE CONSTRUCTION:**  
 Special Construction approval Yes  No  Depth of Completed Well 106 ft.  
 Explosives used Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Amount
Diameter	From To	Material	From To	sacks or pounds
18"	0 18	Bentonite	0 18	500/1000
18"	18 111			

How was seal placed: Method  A  B  C  D  E  
 Other grout poured dry  
 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	+1	99	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 99

(7) **PERFORATIONS/SCREENS:**  
 Perforations Method Holte  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60	100	1/8	3000	10"		<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) **WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min 800 Drawdown \_\_\_\_\_ Drill stem at 70 Time 1 hr.

Temperature of water 51 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 Union Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 35 N or S, Range 39E E or W, WM.  
 Section 30 1/4 1/4  
 Tax Lot 5103 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) same above

(10) **STATIC WATER LEVEL:**  
11 ft. below land surface. Date 1-15-92  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) **WATER BEARING ZONES:**  
 Depth at which water was first found 20

From	To	Estimated Flow Rate	SWL
20	170	800	11

(12) **WELL LOG:** Ground elevation \_\_\_\_\_

Material	From	To	SWL
Soil	0	10	
Sand & clay	10	20	
Sand	20	55	11
Sand & rocks	55	111	11

Date started 1-13-92 Completed 1-15-92

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.  
 Signed Carl P. Tech WWC Number 494  
 Date 1-16-92

(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 well construction standards. This report is true to the best of my knowledge and belief.  
 Signed Carl P. Tech WWC Number 494  
 Date 1-16-92