

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

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

Umat  
54394  
WELL I.D. # L 47074  
START CARD # 138366

(1) LAND OWNER Well Number \_\_\_\_\_

Name Kris + Jane Smith  
Address 208 S.E. 17th St.  
City Milton Freewater State OR Zip 97862

(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 174 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	32	Bentonite	0	32	1750 #/135
6"	32	174				

How was seal placed: Method  A  B  C  D  E  
 Other pour on  
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: 6"	0	117	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 5"	109	174		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) 117

(7) PERFORATIONS/SCREENS:  
 Perforations Method SKILL Saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
109	174	1/4 x 7"	325	5"	20'	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian	Time
25	9		<input checked="" type="checkbox"/>	1 hr.

Temperature of water 56° Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done? NO  Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: 60-70

(9) LOCATION OF WELL by legal description:  
County Umatilla Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 6 N or S Range 35 E or W. W.M.  
Section 13C SW 1/4 NW 1/4  
Tax Lot 500 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 85627 Bark Ln Milton Freewater OR 97862

(10) STATIC WATER LEVEL:  
22 ft. below land surface. Date 9-17-01  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 60'

From	To	Estimated Flow Rate	SWL
60	70	5-10	45'
130	174	25-35	22'

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(12) WELL LOG:  
Ground Elevation \_\_\_\_\_ WATER RESOURCES DEPT SALEM, OREGON

Material	From	To	SWL
Loess - Top soil	0	7	
clay stone	7	15	
clay - Brown	15	32	
Gobbles - med-small	32	35	
cobbles - small	35	40	
sand - Fine	40	61	
cobbles - small - clay br	61	70	
clay - Br cobbles - sm	70	115	
cobbles - small clay br	115	125	
cobbles med clay gray	125	150	
cobbles small clay br	150	160	
cobbles med clay br	160	174	

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WATER RESOURCES DEPT. SALEM, OREGON WATER RESOURCES DEPT. SALEM, OREGON

Date started 9-10-01 Completed 9-17-01

(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.

WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ 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.

WWC Number 1589  
Signed Derald L. Arching Date \_\_\_\_\_