

STATE OF OREGON  
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L. 94477

START CARD # 1003203  
1003204

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

(1) LAND OWNER: Name Verl Miller, Well Number \_\_\_\_\_  
Address PO Box 606  
City La Grande State OR Zip 97850

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

HOLE SEAL: Diameter From To Material From To Sacks or pounds  
18 0 35 Cement 0 35 2 yards

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_

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: existing      
Liner:

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

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

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

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 Harney Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 23S N or S Range 31E E or W. WM.  
Section 11 SE 1/4 SW 1/4  
Tax Lot 1200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 70357 S. Steens View Rd

(10) STATIC WATER LEVEL: \_\_\_\_\_ ft. below land surface. Date 4-1-08  
Artesian pressure \_\_\_\_\_ lb. per square inch Date 4-1-08

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
<u>existing</u>			

(12) WELL LOG: Ground Elevation \_\_\_\_\_

Material	From	To	SWL
<u>existing 12"</u>	<u>0</u>	<u>561</u>	
<u>18" overshot drilling</u>			
<u>cement pad</u>	<u>0</u>	<u>1</u>	
<u>clay brn</u>	<u>1</u>	<u>12</u>	
<u>clay gravel</u>	<u>12</u>	<u>30</u>	
<u>clay blue</u>	<u>30</u>	<u>35</u>	

**RECEIVED** **RECEIVED**  
**APR 07 2008** **NOV 05 2008**  
**WATER RESOURCES DEPT SALEM, OREGON** **WATER RESOURCES DEPT SALEM, OREGON**

Date started 4-1-08 Completed 4-1-08  
(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.  
WVC 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.  
WVC Number 1424  
Signed Zindy Kelly Date 4-2-08

# HARN 51439

**STATE OF OREGON**  
**WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

WELL I.D. # L 94477  
 START CARD # 1003203

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

(1) LAND OWNER: Name Yoni Miller Well Number \_\_\_\_\_  
 Address PO Box 606  
 City La Grande State OR Zip 97850

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

HOLE		SEAL		Sacks or pounds
Diameter	From To	Material	From To	
18"	0 35	Cement	0 35	2 yards

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_

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:	<u>existing</u>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
<u>existing</u>			1 hr.

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 Harnoy Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 23S N or S Range 31E E or W. WM.  
 Section 11 SE 1/4 SW 1/4  
 Tax Lot 1200 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 70357 S. Steens View Rd

(10) STATIC WATER LEVEL:  
18.5 ft. below land surface. Date 4-1-08  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date 4-1-08

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
<u>dry</u>			

(12) WELL LOG:  
 Ground Elevation \_\_\_\_\_

Material	From	To	SWL
existing 12"	0	50	
18" overshot drilling			
cement pad	0	1	
clay brn	1	12	
clay gravel	12	30	
clay blue	30	35	

Date started 4-1-08 Completed 4-1-08

(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 1424  
 Signed Zachary Kelly Date 4-2-08