

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

RECEIVED *Malheur 112*  
 NOV 17 1988  
 (START CARD) # 5336

(1) OWNER: Well Number: 2  
 Name Patrick & Marcia McGourty  
 Address P.O. Box 101  
 City Brogan State Or. Zip 97903

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

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
18	0	18	cement	0	18	14sacks
14	18	62				
12	62	900				

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
14	+1	62	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Liner: \_\_\_\_\_  
 Final location of shoe(s) 62

(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"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
 Yield gal/min 450 Drawdown 240 Drill stem at \_\_\_\_\_ Time 1 hr.

Temperature of water 70° 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: 2'

(9) LOCATION OF WELL by legal description:  
 County Malheur Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 15s. Nor S, Range 42E. E or W, WM.  
 Section 24 S.E. 1/4 S.E. 1/4  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 3024 Waters Lane  
Brogan Or.

(10) STATIC WATER LEVEL:  
9 ft. below land surface. Date 9-20-88  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 250

From	To	Estimated Flow Rate	SWL
250	252	300 Gal.	9

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

Material	From	To	SWL
Soil	0	8	
Brn. clay brn. sand (fine)	8	25	
Brn. clay brn. gravel (large)			
brn. sand (fine)	25	60	
Brn. clay (hard)	60	165	
Blue clay (hard & soft mix)	165	250	
Brn. & blk. gravel (fine) brn. sand (fine) W.B.	250	252	9
Brn. clay brn. & blk. gravel (fine)	252	285	9
Brn. clay	285	310	9
Blue-gray clay	310	355	9
Brn. clay	355	405	9
Brn. clay brn. & blk gravel (fine)	405	500	9
Blue clay	500	520	9
Brn. clay	520	525	9
Blue clay	575	605	9
Brn. clay	605	695	9
Blue clay	695	705	9
Brn. clay brn. & blk. gravel (fine)	705	725	9
Brn. clay 725-875 brn. clay	875	900	9

Date started 9-21-88 Completed 10-10-88

(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 \_\_\_\_\_ Date \_\_\_\_\_ WWC Number \_\_\_\_\_

(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 Herbert H. Bowman Date 11-3-88 WWC Number 1308