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MALH 1222
OBSERVATION WELL

malh
1222

19/46-19A

File Original and
First Copy with the
STATE ENGINEER,
SALEM, OREGON

STATE ENGINEER WATER WELL REPORT
SALEM, OREGON STATE OF OREGON

State Well No. _____

State Permit No. _____

(1) OWNER:

Name Glen Hutchinson
Address ONTARIO ORE.

(2) LOCATION OF WELL:

County _____ Owner's number, if any—
1/4 S.W. 1/4 Section 19 T. 18 R. 46 W.M.
Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(6) CASING INSTALLED:

Threaded Welded
16" Diam. from -3 ft. to 28' ft. Gage 4"
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

(7) PERFORATIONS:

Perforated? Yes No
Type of perforator used Torch
SIZE of perforations 6" in. by 3/8 in.
132 perforations from 18' ft. to 28' ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(8) SCREENS:

Well screen installed Yes No
Manufacturer's Name _____
Type _____ Model No. _____
_____ Slot size _____ Set from _____ ft. to _____ ft.
_____ Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:

Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.
Was a surface seal provided? Yes No To what depth? 17 ft.
Material used in seal— puddled clay
Did any strata contain unusable water? Yes No
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(10) WATER LEVELS:

Static level 11 ft. below land surface Date 6-25-61
Artesian pressure _____ lbs. per square inch Date _____

Log Accepted by: _____

[Signed] _____ Date _____, 19____
(Owner)

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? _____
Yield: 500 gal./min. with 85 ft. drawdown after 4 hrs.
" " " " " "
" " " " " "
" " " " " "
Bailer test gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow g.p.m. Date _____
Temperature of water 55 Was a chemical analysis made? Yes No

(12) WELL LOG:

Diameter of well 16" inches.
Depth drilled 435 ft. Depth of completed well 435 ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
TOP SOIL	0	3
HARD PAN	3	15
SAND	15	17
GRAVEL	17	28
Blue CLAY	28	120
Blue SAND STRIP	120	131
BLUE HARD CLAY	131	160
Reduced to 12" at 138'		
SAND STRIP	160	162
Blue CLAY	162	220
SAND + CLAY MIXED	220	225
HARD CLAY	225	315
Reduced to 8" at 315'		
HARD CLAY	315	325
SAND STRIP	325	328
SAND ROCK	328	400
Pea GRAVEL	400	401
SAND ROCK	401	430
Blue CLAY	430	435

Work started 6-14 1961. Completed 6-24 1961

(13) PUMP:

Manufacturer's Name Peerless
Type: Turbine H.P. 20HP.

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME May Holloway
(Person, firm, or corporation) (Type or print)

Address Ontario Ore.

Driller's well number _____

[Signed] May Holloway
(Well Driller)

License No. 16 Date 7-8, 1961

MALH 1222
For Official Use Only:

Received Date: _____

County Well Log ID #

Malh 1222

Well Identification Tag #

2-57672

2-57672

WELL IDENTIFICATION APPLICATION FORM

BUYER/CURRENT WELL OWNER:

Name: Roland & Jacquelyn Pennington

Mailing Address: 683 Butler Blvd

City: Ontario State: OR Zip: 97914 Phone: (541) 889-8077

NOTE: Well Identification Tag will be sent to the above address unless otherwise specified.

WELL LOCATION:

County: Malheur Owner's Well Number (1st or 2nd well on property, etc) 1 st.

Township: 18 North, Range: 46 East, Section: 19, SW 1/4 SW 1/4

Tax Lot Number: 400 Type of Well: water supply ^{Supplemental} Irrigation monitoring

Address of Well (if different from above): Hwy 20/26 & Halliday Road
(Number) (Street) (City)

Does this well have a formal water right associated with it? Yes: No:

If Yes: Application #: _____ Permit #: _____ Certificate #: _____

(Optional): Latitude _____ Longitude _____ (May sometimes be obtained from Well Log Report)

WELL INFORMATION: (do not complete remainder of application if drillers well report is attached)

See "Dear Landowner" letter for instructions in completing this portion of the application, or contact the Well Identification Program at (503) 378-8455, extension 260.

Start Card Number: Unknown Approx. Well Construction Date: 1961

Well Constructor: Unknown

Name of Land Owner at Time of Construction: Glenn Hutchinson

Well Depth (in feet): 435' Static Water Level (in feet): 10'

Diameter of Exposed Well Casing (in inches): 16"

Please Return Completed Form to: Well ID Program @ Oregon Water Resources Department
158 12th Street NE - Salem, OR 97301-4172

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MAY 02 2002

WATER RESOURCES DEPT.
SALEM, OREGON