

WATER WELL REPORT
STATE OF OREGON

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MARCH 216 216
JUL 2 1985

WATER RESOURCES DEPT
SALEM, OREGON

State Well No. 165/43E-560
State Permit No. _____

(1) OWNER:

Name TOM HOPPET
Address _____
City JAMIESON State OR

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air Driven
Rotary Mud Dug
 Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other
Thermal: Withdrawal Reinjection

(5) CASING INSTALLED:

Steel Plastic
Threaded Welded
12" Diam. from 7' ft. to 180' ft. Gauge 250

(10) LOCATION OF WELL:

County Malheur Driller's well number _____
SW 1/4 NW 1/4 Section 5 T. 16S R. 43E W.M.
Tax Lot # _____ Lot _____ Blk _____ Subdivision _____
Address at well location: _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 90 ft.
Static level 65 ft. below land surface. Date 5-10-85
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 12
Depth drilled 500 ft. Depth of completed well 290 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
SOIL	0	3	
Caliche	3	5	
Brown CLAY	5	40	
Br. & BLK. Med GRAVEL	40	45	
Br. CLAY	45	90	
Br. & BLK. gravel Med. W.B.	90	95	65
Br. CLAY	95	160	65
Br. SAND (FINE)	160	175	65
Br. CLAY (Hard)	175	250	110
Br. & BLK SAND (FINE)	250	295	110
W.B.	295	500	110
gray g-n CLAY	295	500	110

LINER INSTALLED:

_____ " Diam. from _____ ft. to _____ ft. Gauge _____

(6) PERFORATIONS:

Perforated? Yes No
Type of perforator used _____
Size of perforations _____ in. by _____ in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

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

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
_____ a pump test made? Yes No If yes, by whom? DHILLER
_____ " _____ gal./min. with _____ ft. drawdown after _____ hrs.
Air test _____ gal./min. with drill stem at _____ ft. _____ hrs.
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m.
Temperature of water 68 Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Special standards: Yes No
Well seal—Material used Portland Cement
Well sealed from land surface to 18 ft.
Diameter of well bore to bottom of seal 16 in.
Diameter of well bore below seal 12 in.
Number of sacks of cement used in well seal 15 sacks
How was cement grout placed? Grout Pump
Was pump installed? yes Type Torpike 75 Depth 250 ft.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of Water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

Work started 5-2 1985 Completed 7-12 1985
Date well drilling machine moved off of well 7-15 1985

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] _____ Date _____, 19____
(Drilling Machine Operator)

Drilling Machine Operator's License No. _____

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name HERBERT BOWMAN
(Person, firm or corporation) (Type or print)
Address P.O. Box 41 JAMIESON OR
[Signed] Herbert H. Bowman
(Water Well Contractor)

Contractor's License No. 1308 Date 7-21- 1985



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for
Well ID Number

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MAY 29 2018

Do not complete if the well already has a Well Identification Number.

OWRD

I. OWNER INFORMATION

Current Owner Name (please print): CHRIS RAY
Mailing Address: 6144 MALTHAN RANCH RD.
City, State, Zip: IRONSIDE OREGON 97908
Mail Well ID Tag to: [] SAME AS ABOVE [] In Care Of (C/O) ATTACHED TO WELL BY WELL INSPECTOR R
Name & Address:
City, State, Zip:

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 16 (North South) Range: 43 (East West) Section: 5 NW 1/4 of the NW 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 3800 County MALHEUR
GPS Coordinates: 44.21096 -117.48800
Street Address of Well, City: Hwy 26 (approx .2 mi west of)
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Log, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): IRRIGATION
Date Well Constructed (or property built): 7-12-1985 Total Well Depth: 500 Casing Diameter: 12"
Owner at time the well was constructed (if known): Tom Hopper Well Log # (if known): MALH 216
Other Information: WELL # 4

SUBMITTED BY (please print): R.O. MAYNARD STATE WELL INSPECTOR
PHONE: 541-519-7455 EMAIL &/or FAX: ROBERT.O.MAYNARD@OREGON.GOV

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.
Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date: 5-29-18
Well Log Number: MALH 216
Well Identification #: L-113271