STATE OF OREGON

WATER WELL REPORT

(as required by ORS 537.765)

MAL-H 2553

AUG 27 1990

WATER RESOURCES DEPT

30S/45E/1 ba

(START CARD) # 20501

(1) OWNER:

Well Number: 20501

Name Jeff Anderson Estates, Inc.

Address Box 76

City Jordan Valley State Or. Zip 97910

(2) TYPE OF WORK:

[X] New Well [] Deepen [] Recondition [] Abandon

(3) DRILL METHOD

[X] Rotary Air [] Rotary Mud [] Cable

[] Other

(4) PROPOSED USE:

[] Domestic [] Community [] Industrial [] Irrigation

[] Thermal [] Injection [X] Other livestock

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes [] No [X] Depth of Completed Well 60 ft.

Explosives used Yes [] No [X] Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
9 7/8	0	20	cement/grt	0	20	7 sacks
5 7/8	20	60				

How was seal placed: Method [] A [] B [X] 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:	6"	+2.5	60	.250	[]	[]	[X]	[]
					[]	[]	[]	[]
					[]	[]	[]	[]
					[]	[]	[]	[]
Liner:					[]	[]	[]	[]
					[]	[]	[]	[]

Final location of shoe(s) 60'

(7) PERFORATIONS/SCREENS:

[] Perforations Method ____

[] Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						[]	[]
						[]	[]
						[]	[]
						[]	[]
						[]	[]
						[]	[]

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
60	?	40'	1 hr.

Temperature of water ____ Depth Artesian Flow Found ____

Was a water analysis done? [] Yes By whom NA

Did any strata contain water not suitable for intended use? [] Too little

[] Salty [] Muddy [] Odor [] Colored [] Other NA

Depth of strata: ____

(9) LOCATION OF WELL by legal description:

County Malheur Latitude ____ ' ____ " Longitude ____ ' ____ "

Township 30 S N or S, Range 45 E E or W, WM.

Section 1 ne ¼ nw ¼

Tax Lot ____ Lot ____ Block ____ Subdivision ____

Street Address of Well (or nearest address) ____

(10) STATIC WATER LEVEL:

1 ft. below land surface. Date 8/15/90

Artesian pressure ____ lb. per square inch. Date ____

(11) WATER BEARING ZONES:

Depth at which water was first found 60 - 65

From	To	Estimated Flow Rate	SWL
60	65	60	-1

(12) WELL LOG:

Ground elevation 4200

Material	From	To	SWL
SAND	0	4	
Brown Clay	4	10	
Clay with Gravel cemented	10	13	
Blue Gray Clay	13	60	
Sand & Gravel	60	65	-1

Date started 8-15-90 Completed 8-15-90

(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.

WWC Number 1202

Signed Bob Doty Date 8/21/90

(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.

WWC Number 325

Signed Bob Doty for Bill Doty Date 8-22-90

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