

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

Math
2691

145/38E/25 cb

(START CARD) # *23457*

(1) OWNER: Well Number: 1
 Name Ullman Bros. Land and Cattle
 Address 1618 North Las Palmas Ave
 City Hollywood State CA Zip 90028

(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 300 ft.
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
24	0	40	bentonite	0	22	3962 lbs
16	40	173	cement	90	110	1128 lbs
10	173	285				
6	285	300				

How was seal placed: Method A B C D E
 Other bentonite
 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from 110 ft. to 220 ft. Size of gravel 1/8 minus

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	16	1	80	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	10	1.5	220	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	10	205	285	200	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of sheets) _____
(7) PERFORATIONS/SCREENS:
 Perforations Method Downhole
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
175	190	1/8x1	3000	10		<input checked="" type="checkbox"/>	<input type="checkbox"/>
204	220	1/8x1	3000	10		<input checked="" type="checkbox"/>	<input type="checkbox"/>
205	285	1/8x4	3000	6		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 300 Drawdown 150 Drill stem at 300 Time 4hrs
400+ 6hrs

Temperature of water 60 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 Malheur Latitude _____ Longitude _____
 Township 14 S N or S. Range 38 E E or W. WM.
 Section 25 NW 1/4 SW 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) P.O. Box 15
Ironside Or. 97908

(10) STATIC WATER LEVEL:
10 ft. below land surface. Date 9-24
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 30ft.

From	To	Estimated Flow Rate	SWL
30	46	20	22
170	285	400+	10

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Brown Clay	0	18	
Clay and Bolders	18	30	
Gravel and Sand	30	46	22
Brown Caly	46	92	
Blue Clay	92	170	
Broken Rock	170	285	10
Blue Clay	285	300	

Date started 9-17-91 Completed 10-12-91

(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 _____ WWC Number _____
 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed [Signature] WWC Number _____
 Date _____