

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

MACH
2839

20s/46e/29ba
37556

(1) **OWNER:** Name Charles Okano Well Number: _____
 Address 2580 Dorwood
 City DUNSMuir State OR Zip 97115

(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 156 ft.
 Yes No
 Losives used Type _____ Amount _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
1 1/2	0 18	Bentonite	0 18	3200LB

How was seal placed: Method A B C D E
 Other Dry Bentonite Dry Annulus
 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
12	0	23	23	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Final location of shoe(s): _____

(7) **PERFORATIONS/SCREENS:**
 Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
34	74	Fig	1900	12		<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) **WELL TESTS: Minimum testing time is 1 hour**
 Pump Bailer Air Flowing Artesian
 Yield gal/min 500 Drawdown _____ Drill stem at _____ Time 1 hr.

Temperature of water 55 Depth Artesian Flow Found _____
 Was a water analysis done NO 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 20 N of S Range 46 E or W, WM.
 Section 29 NE 1/4 1A5 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Alamoth Ave

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

(11) **WATER BEARING ZONES:**
 Depth at which water was first found 36

From	To	Estimated Flow Rate	SWL
36	72	500	36

(12) **WELL LOG:** Ground elevation _____

Material	From	To	SWL
Basalt	0	5	0
Dark Clay	5	36	0
Brown Silty Clay	36	72	0
Light Clay	72	121	0
Blue Clay	121	156	0

RECEIVED

NOV 12 1992

WATER RESOURCES DEPT.
 SALEM, OREGON

RECEIVED

OCT 15 1992

WATER RESOURCES DEPT.
 SALEM, OREGON

Date started 7-29-92 Completed 8-2-92

(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 Frank Shady WWC Number 789
 Date 8-10-92

(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 Frank Shady WWC Number 789
 Date 8-10-92