

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

*Math 286*

**RECEIVED**  
**MALH 286**  
 JUL 28 1988

*386*  
*16 S / 44 E 31 bc*

**(1) OWNER:** *B*  
 Name *WALTER SCOTT & CHARLIE A. SCOTT*  
 Address *4876 NRD-H*  
 City *DALE* State *ORE* Zip *97918*  
 Owner's Well Number: *4882*

**(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:**  
 Depth of Completed Well *35* ft.  
 Special Standards date of approval \_\_\_\_\_

HOLE meter	From	To	SEAL		Amount sacks or pounds
			Material	To	
16	0	35'	Bentonite	0	12-SACKS

How was seal placed? Method  A  B  C  D  E  
 Other *DRY FROM SURFACE*  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from *18* ft. to *35* ft. Size of gravel *1/4" #8*

**(6) CASING/LINER:**

Diameter	From	To	Gauge	Steel				Welded		Threaded	
				Steel	Plastic	Welded	Threaded	Welded	Threaded		
Casing: <i>12"</i>	<i>1</i>	<i>35</i>	<i>160</i>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Location of shoe(s) \_\_\_\_\_

**(7) PERFORATIONS/SCREENS:**

Perforations Method *SHILL-SAW*  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<i>10'</i>	<i>35'</i>	<i>1/8" x 4</i>	<i>300</i>	<i>12"</i>		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Pumping level	Drill stem at	Time
			1/2 hr
			1 hr
<i>225</i>	<i>28'</i>		<i>2 hr.</i>

Temperature of water *58* 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 *DAWSON* Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township *16* N or S, Range *44* E or W, WM.  
 Section *31* S.W. 1/4 NW 1/4  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) *SAME*

**(10) STATIC WATER LEVEL:**  
 \_\_\_\_\_ ft. below land surface. Date *6-23-88*  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WELL LOG:** Ground elevation \_\_\_\_\_

Material	From	To	WB?	SWL
<i>TOP-SOIL</i>	<i>0</i>	<i>4</i>		
<i>CLAY-DARK</i>	<i>4</i>	<i>12</i>		
<i>CLAY-HARD</i>	<i>12</i>	<i>14</i>		
<i>CLAY-BR</i>	<i>14</i>	<i>22</i>		
<i>GRAVEL-MD</i>	<i>22</i>	<i>30</i>	<i>WB</i>	<i>17</i>
<i>CLAY-LT.BR.</i>	<i>30</i>	<i>32</i>		<i>17</i>
<i>CLAY-BLUE</i>	<i>32</i>	<i>35</i>		<i>17</i>

Date started *6-23-88* Completed *6-26-88*

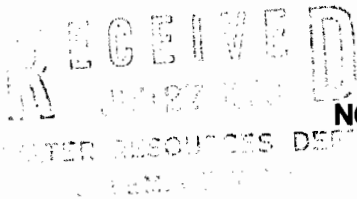
**(unbonded) Water Well Constructor Certification:**  
 I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed *[Signature]* Date \_\_\_\_\_

**(bonded) Water Well Constructor Certification:**  
 I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed *[Signature]* Date *6-25-88*

Company \_\_\_\_\_ Co. Job No. \_\_\_\_\_



“START CARD”

NOTICE OF BEGINNING OF WELL CONSTRUCTION

(as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and Mailing Address: WALTER B. SCOTT & CHARLI A. SCOTT dba Scott Livestock Co. 4876 NORTH ROAD H VALE, OR 97918

Proposed Commencement Date: 6-20-88

Proposed Well Depth and Use: 40 ft, Diameter 12. Includes checkboxes for Domestic, Thermal, Community, Injection, Industrial, Other, and Irrigation (checked).

Proposed Well Location: County Malheur, Township 16 (N or S), Range 44 (E or W), Section 31

- At least 2 of these must be provided: 1. SW 1/4 of NW 1/4 of above section, 2. street address of well location (4876 NORTH ROAD H), 3. tax lot number of well location, 4. attach approved map with location identified.

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

Signature of Owner: Walter B. Scott / Charli Ann Scott

Signature of Bonded Water Well Constructor: Harry Schaffer

Title: sevg, Date: 6/16/88

License No.: 1313, Company:

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.