

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

**MALH 3145**

**RECEIVED**  
**MALH 3145**  
**AUG 31 1995**

**AS/47E/328D**  
**66436**

WATER RESOURCES DEPT. (START CARD) #

(1) OWNER: City of Nyssa Well Number: 9  
 Name: City of Nyssa  
 Address: 148 3rd  
 City: Nyssa State: OR Zip: 97913

(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 Municipal

(5) BORE HOLE CONSTRUCTION:  
 Special Construction approval  Yes  No Depth of Completed Well: 50 ft.  
 Explosives used  Yes  No Type: \_\_\_\_\_ Amount: \_\_\_\_\_

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
26	0 20	Cement	0 20	2456	
16	20 56	Sand		4050	

How was seal placed: Method  A  B  C  D  E  
 Other

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material: \_\_\_\_\_  
 Gravel placed from 10 ft. to 56 ft. Size of gravel: 6-9 Silica

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
20	1	20	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10	2	50	.365	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: \_\_\_\_\_

Final location of shoe(s): 20'

(7) PERFORATIONS/SCREENS:  
 Perforations Method: \_\_\_\_\_  
 Screens Type: 304 Wound Material: Stainless

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
30	40	.080		10"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>AIR 300+</u>		<u>50</u>	<u>1 hr.</u>
<u>amp 450</u>	<u>17'6"</u>		<u>4hr</u>

Temperature of Water: 61' 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: 19S N or S. Range: 47E E or W. WM. \_\_\_\_\_  
 Section: 32 SE 1/4 NW 1/4  
 Tax Lot: 19-47 Lot: 328D Block: 1300 Subdivision: \_\_\_\_\_  
 Street Address of Well (or nearest address): Peace Ave. + So. 5th St. Nyssa

(10) STATIC WATER LEVEL:  
17'6" ft. below land surface. Date: 6-20-95  
 Artesian pressure: \_\_\_\_\_ lb. per square inch. Date: \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found: 20

From	To	Estimated Flow Rate	SWL
<u>20</u>	<u>37</u>	<u>450</u>	<u>17'6"</u>

(12) WELL LOG:  
 Ground elevation: \_\_\_\_\_

Material	From	To	SWL
<u>Brown Silty Clay</u>	<u>0</u>	<u>15</u>	
<u>Sand and Gravel</u>	<u>15</u>	<u>37</u>	<u>17'6"</u>
<u>Blue Clay</u>	<u>37</u>	<u>58</u>	

Date started: 6-2-95 Completed: 6-20-95

(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: 682  
 Date: 8-7-95



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.oregon.gov/owrd

Application for
Well ID Number

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SEP 21 2018

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

I. OWNER INFORMATION

Current Owner Name (please print): City of Nyssa
Mailing Address: 301 Main Street
City, State, Zip: Nyssa, OR. 97913
Mail Well ID to: [X] SAME AS ABOVE [ ] In Care Of (C/O)
Name & Address:
City, State, Zip:

OWRD

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

Township: 19S (North / South) Range: 47E (East / West) Section: 32 SE 1/4 of the NW 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 8100 County Malheur
GPS Coordinates: 43deg 52' 24.45"N, 116deg 59' 59.97W
Street Address of Well, City: Well #9 is at the NE corner of King Ave & 6th Street
If the property had a different street address in the past:

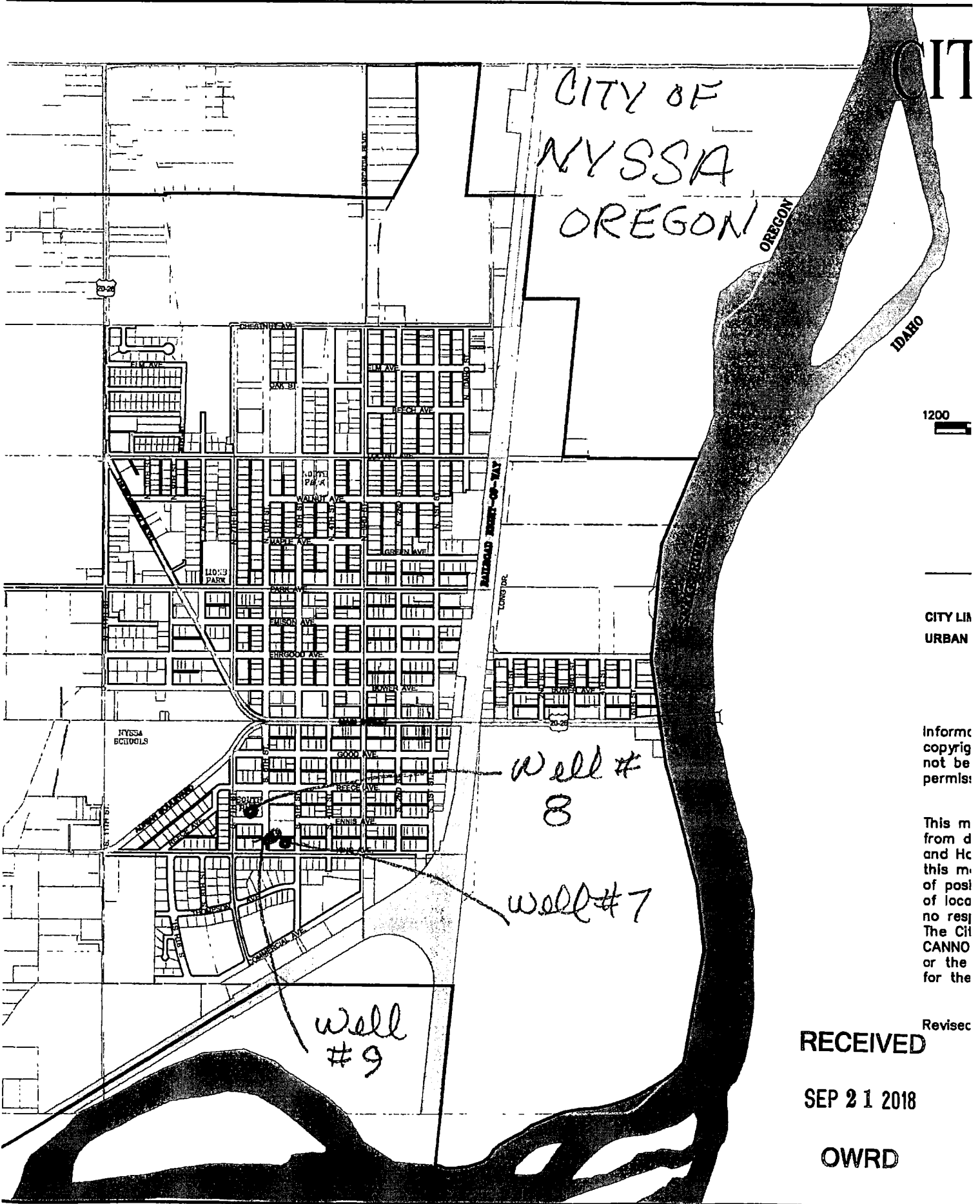
III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Municipal
Date Well Constructed (or property built): 6/2/1995 Total Well Depth: 58 feet Casing Diameter: 10 inch
Owner at time the well was constructed (if known): City of Nyssa Well Report # (if known): MALH 3145
Other Information:

SUBMITTED BY (please print): Michael E. Holladay for the City of Nyssa
PHONE: 208-741-1483 EMAIL &/or FAX: racememory@yahoo.com.

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: 9-21-18 Well Report Number: MALH 3145 Well Identification #: L-131849



CITY OF  
NYSSA  
OREGON

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CITY LIMITS  
URBAN

Informal  
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Well #  
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Well # 7

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