

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

MALH
51240

(START CARD) # 115916

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number L15943
 Name Rick - Randy Simmons
 Address 515 Smiyh St. So.
 City Vale State Or. Zip 97918

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

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

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12	0	120	Port.cement	30	120	32 sacks
			Bentonite	4	30	2800 lbs.
8	120	620				

How was seal placed: Method A B C D E
 Other Bentonite-dry
 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:	8	+1	122	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 122

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	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"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
30	12 ft.		1 hr.

Temperature of water 60 Depth Artesian Flow Found _____
 Was a water analysis done? No Yes By whom _____
 Did any strata contain water not suitable for intended use? No Too little
 Salty Muddy Odor Colored Other
 Depth of strata: 20 ft.

(9) LOCATION OF WELL by legal description:
 County Malheur Latitude _____ Longitude _____
 Township 15 s. N or S Range 42 e. E or W. WM.
 Section 24 S.W. 1/4 S.W. 1/4
 Tax Lot 2100 Lot 10 Block 36 Subdivision _____
 Street Address of Well (or nearest address) Brogan Or. 97903

(10) STATIC WATER LEVEL:
80 ft. below land surface. Date 4-28-99
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 1st. water 103 ft. cased out
2 ed. water 580 ft.

From	To	Estimated Flow Rate	SWL
580 ft.	600 ft.	200 gpm.	80

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Soil	0	2	
Brn. clay	2	20	
Brn. gravel (med)	20	30	
Brn. clay	30	103	
Brn. gravel (fine) W.B.	103	105	85
Water cased out			
Brn. clay	105	250	
Blue-gry. clay	250	270	
Gry clay	270	580	
Gry. clay (hard) gry sand (fine)	580	600	80
Gry. clay	600	620	80

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MAY 1 8 1999

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 4-21-99 Completed 5-7-99

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.
 WWC Number _____
 Signed _____ 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
 WWC Number 1308
 Signed Herbert H. Bowman Date 5-13-99