

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

MALH
 51258

(START CARD) # W 63824

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

(1) OWNER: Well Number L14933
 Name City of Vale
 Address 252 B Street West
 City Vale State Oregon 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 Hydrogeologic

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 33 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
8"	0	28	Bentonite			1100 #
12"	0	33	BENTONITE	0	18	1100 LBS

How was seal placed: Method A B C D E
 Other FOUR
 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"	12	28	100	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8"	28	33	100	<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) _____
 (7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type Johnson Material S.S.

From	To	Slot size	Number	Diameter	Tube/pipe size	Casing	Liner
18	28	100		8"	pipe	<input 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
75	-	30	1 hr.

Temperature of water _____ 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 18 N or S Range 45 E or W. WM.
 Section 31 NW 1/4 NW 1/4
 Tax Lot 7100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 3800 Airport Rd Vale

(10) STATIC WATER LEVEL:
9 FT ft. below land surface. Date 8-29-97
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 16'

From	To	Estimated Flow Rate	SWL
16	26	75	9

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Top soil	1	2	
hard pan	2	3	
Silty clay	3	16	
Gravel	16	26	
BLUE CLAY	26	33	

RECEIVED

JUN 09 1999

WATER RESOURCES DEPT.
 SALEM, OREGON

Date started 8-29-97 Completed 8-29-97

(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.

Signed Dan Adamson WWC Number 1500 Date 6-7-99

(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.

Signed _____ WWC Number _____ Date _____