

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

WELL ID. # L 61641  
START CARD # 154995

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

(1) LAND OWNER: Well Number 61641  
Name Bob Gressley  
Address 4010 Freese Lane  
City Vale State OR Zip 97188

(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 260 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Back or pounds
<u>22</u>	<u>0</u>	<u>18</u>	<u>Grout</u>	<u>0</u>	<u>18</u>	<u>41</u>
<u>16</u>	<u>18</u>	<u>75</u>				
<u>12</u>	<u>75</u>	<u>260</u>				

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

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from 18 ft. to 50 ft. Size of gravel 3/4

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	<u>16</u>	<u>+1</u>	<u>61</u>	<u>250</u>	<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"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) 61 ft

(7) PERFORATIONS/SCREENS:

Perforations Method touch  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>46</u>	<u>60</u>	<u>6</u>	<u>210</u>	<u>7/4</u>	<u>16</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>250</u>	<u>150 ft</u>		<u>1 hr.</u>
			<u>4 hrs.</u>

Temperature of water 64° 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 46E E or W. WM.  
Section 21 SW 1/4 SW 1/4  
Tax Lot 2401 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Onion ave + Arabian ave Intersection

(10) STATIC WATER LEVEL:  
53 ft ft. below land surface. Date 4-12-03  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 140 ft

From	To	Estimated Flow Rate	SWL
<u>140</u>	<u>260</u>	<u>250 gpm</u>	<u>53 ft</u>

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

Material	From	To	SWL
<u>topsoil</u>	<u>0</u>	<u>4</u>	
<u>clay</u>	<u>4</u>	<u>50</u>	
<u>sandy gravel</u>	<u>50</u>	<u>55</u>	
<u>clay</u>	<u>55</u>	<u>140</u>	
<u>blue clay/sandy strips</u>	<u>140</u>	<u>260</u>	<u>53</u>

Date started 4-7-03 Completed 4-12-03

(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 \_\_\_\_\_ 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 water supply well construction standards. This report is true to the best of my knowledge and belief.  
Signed Jan M. G... WWC Number 1485 Date 5-05-03