

WELL I.D. # L 61648
START CARD # 157998

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

(1) LAND OWNER _____ Well Number 61648
Name Robert + Shepherd
Address 2110 6th Ave W
City Valle State OR Zip 97718

(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 275 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds	
16	0	30	Portland	0	30		
12	30	275				65	

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

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:	12	12	30	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None
Final location of shoe(s) 30-11

(7) PERFORATIONS/SCREENS:

☐ Perforations	Method	
☐ Screens	Type	Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☒ Pump	☐ Bailer	☐ Air	☐ Flowing ☐ Artesian
Yield gal/min	Drawdown	Drill stem at	Time
180 gpm	48 ft		1 hr.
			4 hrs

Temperature of water 60° 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 17S N or S Range 44E E or W. WM.
Section 27 SW 1/4 SW 1/4
Tax Lot 3600 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 2070 5th Ave W

(10) STATIC WATER LEVEL:
50-2 1/4 ft. below land surface. Date 7-15-03
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
195	275	500 gpm	50'-2"

(12) WELL LOG:

Ground Elevation _____

[illegible]

Date started 6-24-03 Completed 7-18-03

(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 LM 76 WWC Number 1485
Date 8-15-03