

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

WELL ID. # L 83781

START CARD # 180035

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

(1) LAND OWNER Well Number _____
Name **NATHAN & ANGIE ALDRED**
Address **3794 ARROW LN.**
City **VALE** State **OR** Zip **97918**

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

(3) DRILL METHOD
☐ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger ☐ Cable Mud
☐ Other _____

(4) PROPOSED USE
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☐ No
Depth of Completed Well **60** ft.
Explosives used: ☐ Yes ☐ No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
10"	0	22	BENTONITE	0	22	31 SACKS
6"	22	60				

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

☒ Other **BENTONITE RULE # 690-210-340**

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Casing	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
6"	6"	+1	44	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4 1/2"	20	60		☐	☒	☐	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None

Final location of shoe(s) **44**

(7) PERFORATIONS/SCREENS

☐ Perforations Method _____
☒ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
40	60	3/32x2	FACTOR	4 1/2"		☐	☒
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☒ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
30	35		

Temperature of water **65** 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 (legal description)

County **MALHEUR**
Tax Lot **411** Lot _____
Township **18** S Range **45** E WM
Section **28** NE 1/4 NE 1/4

Lat _____° _____' _____" or _____ (degrees or decimal)
Long _____° _____' _____" or _____ (degrees or decimal)

Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL

30 ft. below land surface. Date **5/17/2006**

_____ ft. below land surface. Date _____

Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found **35**

From	To	Estimated Flow Rate	SWL
35	43	30	30

(12) WELL LOG

Material	From	To	SWL
TOPSOIL	0	2	
BROWN SCLAY	2	35	
PEA GRAVEL W/B	35	43	30
BLUE CLAY	43	60	

RECEIVED

MAY 26 2006

WATER RESOURCES DEPT
SALEM, OREGON

Date Started **5/15/2006**

Completed **5/19/2006**

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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 _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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 **1349** Date **5/19/2006**

Signed *Archie W. Page*