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STATE ENGINEER,
SALEM, OREGON

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STATE ENGINEER

WATER WELL REPORT MORR 124

State Well No. 2/25-4 L

STATE OF OREGON 61898

State Permit No.

(1) OWNER:

Name *Mrs. Emma P. Beck*
Address *Lexington Oregon*

(2) LOCATION OF WELL:

County *Morrow* Owner's number, if any—
S.W. 1/4 1/4 Section *4* T. *2, S.* R. *25.* W.M.
Bearing and distance from section or subdivision corner
*From House across Highway
200 ft*
1/2 mile south west of Lexington

(3) TYPE OF WORK (check):

Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic Industrial Municipal
ation Test Well Other

(5) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(6) CASING INSTALLED:

Threaded Welded
8" Diam. from *surface* ft. to *73* ft. Gage *38 lb*
" Diam. from ft. to ft. Gage *none*
" Diam. from ft. to ft. Gage

(7) PERFORATIONS:

Perforated? Yes No

Type of perforator used
SIZE of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(8) SCREENS:

Well screen installed Yes No

Manufacturer's Name
Type Model No.
diam. Slot size Set from ft. to ft.
diam. Slot size Set from ft. to ft.

(9) CONSTRUCTION:

Well gravel packed? Yes No Size of gravel:
Gravel placed from ft. to ft.
Was a surface seal provided? Yes No To what depth? *60-73* ft.
Material used in seal— *Cement*
Did any strata contain unusable water? Yes No
Type of water? *Good* Depth of strata
Method of sealing strata off

(10) WATER LEVELS:

Static level *47'* ft. below land surface Date *6/28/60*
Artesian pressure lbs. per square inch Date

Log Accepted by: *E. K. Peck*
[Signed] *FOR EMMA P. BECK* Date *aug 3*, 19 *60*
(Owner)

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom? *A. M. Edwards*
Yield: *80, 17 PPM* gal./min. with ft. drawdown after hrs.
" " *no draw down* " " " " " "

Bailer test *30* gal./min. with ft. drawdown after *90* hrs.

Artesian flow g.p.m. Date

Temperature of water *40* Was a chemical analysis made? Yes No

(12) WELL LOG:

Diameter of well *8"* inches.

Depth drilled *203* ft. Depth of completed well *203-6* ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
TOP GALL	1140	3
Hard Pan	310	38
Brown & yellow loam	35	43
blue basalt	22	65
Red loam	9	74
Blue basalt	3	77
Brown loam	4	81
Blue basalt heavy hard	3	84
Hard blue basalt	11	95
grey basalt	7	102
Hard grey basalt	2	104
Brown & red loam	18	122
hard basalt	18	140
Porosity of iron ore	14	154
Hard grey basalt	3	157
then water & some red loam	7	165
Blue porous honey combed basalt	19	184
holed with 30 PPM		
alternated soft & hard in every few rods to		200
then heavy hard basalt	200	203-6

Work started *April 28* 19 Completed *July 9*, 19 *60*

(13) PUMP:

Manufacturer's Name
Type: H.P.

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME *A. M. Edwards*
(Person, firm, or corporation) (Type or print)

Address *LEXINGTON*

Driller's well number *29*

[Signed] *A. M. Edwards*
(Well Driller)

License No. *71* Date *July 9*, 19 *60*



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for
Well ID Number

RECEIVED

MAY 10 2016

WATER RESOURCES DEPT
SALEM, OREGON

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name (please print): Stephen K. Peck
Mailing Address: 545 Baldwin Road,
City, State, Zip: Walla Walla, WA 99362
Mail Well ID Tag to: [X] SAME AS ABOVE [] In Care Of (C/O)
Name & Address:
City, State, Zip:

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 2S (North / South) Range: 25E (East / West) Section: 4 1/4 of the SW 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 903 County Morrow
GPS Coordinates:
Street Address of Well, City: 63225 Clarks Canyon Road, Lexington
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Log, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Domestic / Irrigation
Date Well Constructed (or property built): Aug 1960 Total Well Depth: 203 ft Casing Diameter: 8 in
Owner at time the well was constructed (if known): Emma P. Peck Well Log # (if known): MORR124
Other Information:

SUBMITTED BY (please print): Stephen K. Peck
PHONE: 541 922 8082 EMAIL &/or FAX: skpeck46@hotmail.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.
Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

5-10-16

Well Log Number:

MORR 124

Well Identification #:

L-122904