

NOTICE TO WATER WELL CONTRACTOR

MORR 159

The original and first copy
of this report are to
be filed with the

STATE ENGINEER, SALEM, OREGON 97310

within 30 days from the date
of well completion.

(1) OWNER:

Name Cris Crisp
Address Heppner, Ore.

(2) TYPE OF WORK (check):

New Well ☒ Deepening ☐ Reconditioning ☐ Abandon ☐

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary ☒ Driven ☐
Cable ☐ Jetted ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☐ Industrial ☐ Municipal ☐
Irrigation ☒ Test Well ☐ Other ☐

CASING INSTALLED:

Threaded ☐ Welded ☒

" Diam. from 0 ft. to 20 ft. Gage 250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

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.		
perforations from _____ ft. to _____ ft.		

(7) 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.

(8) WATER LEVEL: Completed well.

Static level 40 ft. below land surface Date 3/9/68
Artesian pressure _____ lbs. per square inch Date _____

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☐ Yes ☒ No If yes, by whom?

Tested: _____ gal./min. with _____ ft. drawdown after _____ hrs.
in. tested 30 A.P.M.

Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.

Artesian flow _____ g.p.m. Date _____

Temperature of water _____ Was a chemical analysis made? ☐ Yes ☐ No

(10) CONSTRUCTION:

Well seal—Material used BENTONITE

Depth of seal 18 ft.

Diameter of well bore to bottom of seal 8 1/2 in.

Were any loose strata cemented off? ☐ Yes ☒ No Depth _____

Was a drive shoe used? ☐ Yes ☒ No

Did any strata contain unusable water? ☐ Yes ☒ No

Type of water? _____ depth of strata _____

Method of sealing strata off _____

Was well gravel packed? ☐ Yes ☒ No Size of gravel: _____

Gravel placed from _____ ft. to _____ ft.

WATER WELL REPORT

STATE OF OREGON

(Please type or print)
do not write above this line

State Well No. 2/26-23

State Permit No. _____

(11) LOCATION OF WELL:

County Morrow Driller's well number _____

1/4 1/4 Section 23 T. 25 R. 26 E.W.M.

Bearing and distance from section or subdivision corner _____

(12) WELL LOG:

Diameter of well below casing 6"

Depth drilled 300 ft. Depth of completed well 300 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level as drilling proceeds. Note drilling rates.

MATERIAL	From	To	SWL
Soil Brown	0	5	
Gravel	5	9	
rock, Broken gray	9	14	
rock, gray	14	42	
rock, porous gray	42	55	
rock, porous black/greenish	55	90	
rock, red porous	90	92	
rock, gray	92	122	
rock, black porous/shale	122	133	
rock, gray	133	151	
rock, gray porous/shale	151	195	
rock, gray	195	265	
rock, black porous	265	290	
rock, brown	290	300	

Work started Feb. 7 1968 Completed Feb. 9 1968

Date well drilling machine moved off of well Feb. 10 1968

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Thigil Brown Date 3/7, 1968
(Drilling Machine Operator)

Drilling Machine Operator's License No. _____

Water Well Contractor's Certification:

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

NAME Roy T. French
(Person, firm or corporation) (Type or print)

Address B.T. 2 Box 129 Pendleton, Ore.

[Signed] Roy T. French
(Water Well Contractor)

Contractor's License No. 107 Date March 7, 1968

(USE ADDITIONAL SHEETS IF NECESSARY)