

RECEIVED

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

MORR  
50473

FEB 24 1999

WELL I.D. # L 27566  
START CARD # 60422

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

WATER RESOURCES DEPT.  
SALEM, OREGON

(1) OWNER: Well Number \_\_\_\_\_  
Name Dept of Morrow  
Address PO 200  
City Beardman State OR Zip 97818

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

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
	24 0	19	Benite	0 18	37 SKS

How was seal placed: Method  A  B  C  D  E  
 Other Dry granule  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from 0 ft. to 43 ft. Size of gravel 3/8

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	24	0	19	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	16	11	20	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
		40	43	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 19

(7) PERFORATIONS/SCREENS:

Perforations Method \_\_\_\_\_  
 Screens Type Johanson Material SS

From	To	Slot size	Number	Diameter	Tap/pipe size	Casing	Liner
20	40	.100		16	pipe	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian
200		47	<input type="checkbox"/> <input checked="" type="checkbox"/>

Temperature of water 57° 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 Morrow Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 7 N or S Range 25 E or W. WM.  
Section 11 SW 1/4 NW 1/4  
Tax Lot Unknown Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:  
9 ft. below land surface. Date 12-18-98  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 9

From	To	Estimated Flow Rate	SWL
9	47	200	9

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

Material	From	To	SWL
Sand, gravels & Boulders	0	40	9
Basalt Fractured	40	47	

Date started 12-14-98 Completed 2-9-99

(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.  
WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ 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.  
WWC Number 759  
Signed [Signature] Date 2-14-99