

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

MORR
50619

WELL I.D.# L0000665

(START CARD) # 102726

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

(1) OWNER: Well Number _____

Name Al & Donna Osmin
Address Rt. 1, Box 3366
City Heppner State OR Zip 97836

(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 855 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
8"	655	855				
15"	0	119	Cement	0	119	60 sacks
12"	119	500				
8"	500	655				

How was seal placed: Method A B C D E
 Other _____

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"	+1	119	288	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 119

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Casing	Liner
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>600</u>		<u>855</u>	1 hr.

Temperature of water 59° 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 2S N or S Range 26E E or W. WM.
Section 7 SW 1/4 SW 1/4
Tax Lot 1202 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Rt. 1
Heppner, OR 97836

(10) STATIC WATER LEVEL:

205 ft. below land surface. Date 11-17-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 704

From	To	Estimated Flow Rate	SWL
<u>704</u>	<u>727</u>	<u>100</u>	<u>205</u>
<u>810</u>	<u>831</u>	<u>100</u>	<u>205</u>

RECEIVED

(12) WELL LOG: OCT 20 1999

Material	From	To	SWL
Existing well	0	655	
Existing hole diameter			
	10"	0 119	
	8"	119 655	
Existing casing diameter	8"	+1 119	
Deepening:			
Gray basalt	655	704	
Gray basalt, broken	704	727	WB
Gray basalt	727	810	
Black basalt with green soapstone	810	831	WB
Gray basalt	831	855	
Alteration:			
Pulled existing 8" casing, installed 12" casing.			
Reamed existing 10" hole to 15"			
Reamed existing 8" hole to 12", 119 to 500 ft.			

Date started 11-5-97 Completed 11-17-97

(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 1218
Signed Patrick Wallock Date 11-27-97