STATE OF OREGON

WATER SUPPLY WELL REPORT

WELL I.D. # L 55274 START CARD # 141443 (as required by ORS 537.765) Instructions for completing this report are on the last page of this form. (1) LAND OWNER
Name MARY BEAME Well Number <u>55</u>274 (9) LOCATION OF WELL by legal description: County Morrow Latitude Longitude_ Address 59896 Township 3 5 N on Range 27 E 🖒 or W. WM. State OREGON **SW** 1/4 SE 1/4 (2) TYPE OF WORK Tax Lot 1360 Lot Block _Subdivision _ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment Street Address of Well (or nearest address) _ (3) DRILL METHOD: ■ Rotary Air □ Rotary Mud □ Cable □ Auger (10) STATIC WATER LEVEL: Date 01-25-62 Other. ft. below land surface. _lb. per square inch (4) PROPOSED USE: Artesian pressure . Date _ ☑ Domestic ☐ Community ☐ Industrial ☐ Irrigation (11) WATER BEARING ZONES: ☐ Injection ☐ Livestock ☐ Other. Depth at which water was first found (5) BORE HOLE CONSTRUCTION: Special Construction approval Yes M No Depth of Completed Well From To **Estimated Flow Rate** SWL Explosives used ☐ Yes 🔀 No Type_ 79' 72' 43' 20 gpm <u> 302'</u> 150 gpm 431 <u>330′</u> Diameter From / Material Sack or pounds To 18 From To 392 901 BET LEMENT 10 SALKS 12" 18' 240 10" 240' 558 (12) WELL LOG: $\Box A$ \square B □ E How was seal placed: Method **X**C \square D Ground Elevation _ Other_ Material From To **SWL** Backfill placed from ____ ft. to_____ ft. Material SOIL Gravel placed from __ 5 Size of gravel ft. to 0 (6) CASING/LINER: CEMENTED GRAVES 5 10 Diameter From To Gauge Steel Plastic Welded Threaded 10 72 BLACK BASALT 1.250 X Casing: 12" <u>797</u> X BROKEN BLACK BASALT 72 79' 302' GREY WI BLACK BASALT 302 330 BLACK W/ SCORRIA 377 BLACK BASALT <u>33ර</u> 392 Liner: ACE & BROWN W/ GAN CM 377 392 <u>501</u> BLACK BASALT Drive Shoe used ☐ Inside ☐ Outside 🔀 None <u>558</u> 501 4 GREY BASALT Final location of shoe(s)_ (7) PERFORATIONS/SCREÉNS: □ Perforations Method □ Screens Material Type Tele/pipe From Casing Liner FFR 0 4 2002 RESOURCES DEPT Date started 01-04-62 Completed (8) WELL TESTS: Minimum testing time is 1 hour Flowing (unbonded) Water Well Constructor Certification: ☐ Bailer ☐ Air ☐ Artesian I certify that the work I performed on the construction, alteration, or abandon-Yield gal/min Drawdown Drill stem at Time ment 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 300-1 hr. 55B knowledge and belief. <u> 300+</u> 35*8* WWC Number _ 150+ Date 01-25-0 Signed Temperature of water ______ (bonded) Water Well Constructor Certification: Depth Artesian Flow Found Was a water analysis done? ☐ Yes By whom _ I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work Did any strata contain water not suitable for intended use? ☐ Too little performed during this time is in compliance with Oregon water supply well ☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other ☐ construction standards. This report is true to the best of my knowledge and belief WWC Number_ Depth of strata: _

Date 1 - 25