

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

APR 30 2002

WATER RESOURCES DEPT.
SALEM, OREGON

MORR
51053

WELL I.D. # L 55274
START CARD # 141460

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

(1) LAND OWNER

Name MARY BEAMER
Address 59896 BALM FORK ROAD
City HEPPNER State OR Zip 97836

Well Number 55274

(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 1162 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	558	1162				

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:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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"/>

Drive Shoe used ☐ Inside ☐ Outside ☒ None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

		Method		Type		Material	
From	To	Slot size	Number	Diameter	Tele/pipe size	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

		Flowing	
Yield gal/min	Drawdown	Drill stem at	Time
300+		1162	1 hr.

Temperature of water 61° 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 35 N or S Range 27 E or W. WM.
Section 18 S/W 1/4 S/E 1/4
Tax Lot 1300 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:

43' ft. below land surface. Date 4-15-02
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
568	575	??	46
975	984	POSSIBLE H ₂ O	
		POSSIBLE H ₂ O	

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
BLK W/GRY BASALT	558	568	
BLK W/GRN CLY STONE	568	575	
BLK, TAN, BRN, GRN CLY ST.	575	585	
GRY BASALT	585	690	
BLK W/BRN BASALT	690	698	
BRN BLK W/GRN CLY ST.	698	746	
BLK BASALT	746	774	
BLK W/BRN BASALT	774	785	
BLK BASALT	785	870	
GRY BASALT	870	975	
GRN CLY ST. W/BRN CLY ST.	975	984	43'
BRN CLY ST.	984	987	
BRN CLY ST. W/GRN CLY ST.	987	989	
BLK BASALT W/GRN CL.	989	995	
BLK BASALT	995	1005	
BLK W/BRN W/GRN CL.	1005	1030	
BLK BASALT	1030	1071	
BLK W/BRN W/GRN CLY ST.	1071	1145	
BLK BASALT	1145	1162	

Date started 3-22-02 Completed 4-15-02

(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.

Signed Rusty R. Oth WWC Number 1702
Date 4-16-02

(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.

Signed Dany Burel WWC Number 544
Date 4-16-02