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

WATER RESOURCES DEPT
SALEM, OREGON

WELL I.D. # L 80297

START CARD # 179844

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

(1) LAND OWNER Well Number _____
Name Jedde Aylott
Address 76625 Frontage RD
City Hermiston State OR Zip 97838

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other _____

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 197 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
12"	0	18	Bentonite	0	18	12 Sacks
10"	18	197				

How was seal placed: Method A B C D E
 Other Pared 3/8 chips
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

Casing	Diameter	From	To	Gauge	Steel				Plastic				Welded				Threaded			
					□	□	□	□	□	□	□	□	□	□	□	□	□	□	□	□
	8"	0	197	280	<input checked="" 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: _____

Drive Shoe used Inside Outside None
Final location of shoe(s) Tubex shoe @ 197'

(7) PERFORATIONS/SCREENS
 Perforations Method DTH Perforator
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
160	197	2 1/4	500			<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min 200+ Drawdown _____ Drill stem at 197 Time 1 Hr

Temperature of water 65 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 (legal description)
County Wash Morrow
Tax Lot 300 Lot _____
Township 4N N or S Range 27E E or W WM
Section 19 SE 1/4 SE 1/4

Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)

Street Address of Well (or nearest address) Same
N.E. corner of property

(10) STATIC WATER LEVEL
_____ ft. below land surface. Date _____
47' ft. below land surface. Date 11-2-05
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found 160'

From	To	Estimated Flow Rate	SWL
160	187	200+	47'

(12) WELL LOG

Material	Ground Elevation		SWL
	From	To	
SAND	0	50	
Course sand/pea gravel	50	160	
Gravel	160	187	47'
Broken Black Drust	187	197	

Date Started 11-2-05 Completed 11-2-05

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, 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 1738 Date 11-3-05
Signed _____

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, 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 544 Date 11-3-05
Signed Jamy Bond