

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

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

WELL I.D. # L 112831
START CARD # 212220

(1) LANDOWNER _____ Well Number _____
Name Van Studer
Address 81264 W. 8th Rd.
City Irreigon State OR Zip 97744

(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 20 ft.
Explosives used ☐ Yes ☐ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	18	Bentonite	0	18	16 sacks
6"	18	70				
Calculated seal:						16 sacks

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other Bored 3/4" bentonite

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:	6"	+1	63	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐
Drive shoe used	☐ Inside	☒ Outside	☐ None					
Final location of shoe(s)			63					

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailor ☒ Air ☐ Flowing
☐ Artesian

Yield gal/min Drawdown Drill stem at Time

40		70	1 hr.

Temperature of water 59° Depth Artesian Flow Found _____
 Was a chemical analysis done? Yes By whom _____
 Did all strata contain water not suitable for intended use? ☐ Too little
☐ Salty ☐ Muddy ☐ Odorous ☐ Colored ☐ Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Morrow Latitude _____ Longitude _____
Township 5N N or S Range 26E E or W. WM.
Section 26 NW 1/4 NW 1/4
Tax Lot 303 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address)
81327 W. 8th Rd., Irrigon, OR 97844

(10) STATIC WATER LEVEL:
30 ft. below land surface. Date 1-16-16
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 30

From	To	Estimated Flow Rate	SWL
26	70	40	30

(12) WELL LOG: _____
Ground Elevation _____

Material	From	To	SWL
Sandy soil	0	2	
Cemented gravel and cobbles	2	26	
Sandy gravel	26	70	WB
RECEIVED BY OWRD			
FEB 12 2016			
SALEM, OR			

Date started 1-13-16 Completed 1-16-16

(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.

Signed Patrick Wallace WWC Number 1218 Date 2-10-11