

STATE OF OREGON
WATER SUPPLY WELL REPORT

MORR 52973

WELL I.D. LABEL# L

Page 1 of 3

152639

START CARD #

1073096

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

3/26/2024

(1) LAND OWNER

Owner Well I.D.

First Name VIRGIL

Last Name MORGAN

Company MORGAN RANCHES

Address PO BOX 322

City IONE

State OR

Zip 97843

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion

☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd
Material From To Amt sacks/lbs
Seal: From To Amt sacks/lbs

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other

(4) PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Community

☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 506.00 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
12	0	18	Bentonite Chips	0	18	18	S
8	18	506			Calculated	10.21	
					Calculated		

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: POUR 3/8 BENTONITE C

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: ☐ Type Amount

Seal Placement Begin Date 3/20/2024 Begin Time 16 00

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount

Actual Amount

(6) CASING/LINER

Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)
Temp casing ☐ Yes Dia From + To

(7) PERFORATIONS/SCREENS

Perforations Method

Screens Type Material

Perf/	Casing/	Screen	Screen	Liner	Dia	From	To	Scrm/slot	Slot	# of	Tele/
								width	length	slots	pipe size

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
15		506	1

Temperature 64 °F Lab analysis ☐ Yes By

Water quality concerns? ☐ Yes (describe below) TDS amount 110 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County MORROW Twp 1.00 N N/S Range 25.00 E E/W WM

Sec 29 NE 1/4 of the NW 1/4 Tax Lot 2500

Tax Map Number Lot

Lat ° ' " or 45.54422277 DMS or DD

Long ° ' " or -119.71895421 DMS or DD

☒ Street address of well ☐ Nearest address

68498 LLOYD RD IONE OR

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	3/25/2024			259
Flowing Artesian?				
Dry Hole?				

WATER BEARING ZONES

Depth water was first found 278.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
3/22/2024	278	296	5			259
3/22/2024	339	360	5			259
3/25/2024	431	440	5			259

(11) WELL LOG

Ground Elevation 1292.53 FT

Material	From	To
SOIL	0	5
CEMENTED GRAVELS	5	8
WEATHERED BROWN BASALT	8	12
BLACK BASALT	12	47
BLACK & BROWN W/YELLOW CLAYSTONE	47	95
BLACK BASALT W/ YELLOW CLAYSTONE	95	137
BLACK, RED & BROWN BASALT	137	197
BLACK BASALT W/BLUE GRAY CLAYSTONE	197	216
BLACK & RED BASALT W/ GREEN CLAYSTON	216	232
BLACK BASALT W/ GREEN CLASTONE	232	278
BLACK & BROWN W/ GREEN CLAYSTONE	278	296
BROWN BASALT W/ TAN CLAYSTONE	296	310
BLACK BASALT W/ TAN CLAYSTONE	310	315
BLACK BASALT W/ GREEN CLAYSTONE	315	339
BLACK & BROWN BASALT W/ GREEN CLAYST	339	360
BLACK BASALT W/ GREEN CLAYSTONE	360	376
BLACK W/ GREEN CLAYSTONE & WHITE SS	376	382
BLACK BASALT W/ GREEN CLAYSTONE	382	431
BLACK BASALT W/ BLUE CLAYSTONE	431	440

Construction

Begin Date 3/20/2024 Begin Time 12 00 End Date 3/25/2024

(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.

License Number 1963 Date 3/26/2024

Signed JOHN KLINE (E-filed)

(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.

License Number 1881 Date 3/26/2024

Signed GARRY ZOLLMAN (E-filed)

Contact Info (optional) GARRY ZOLLMAN

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

MORR 52973

3/26/2024

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 45.54422277 Datum: WGS84

Longitude: -119.71895421

Township/Range/Section/Quarter-Quarter Section:
WM1.00N25.00E29NENW

Address of Well:
68498 LLOYD RD IONE OR

Well Label: 152639

Printed: March 26, 2024

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

