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UMAT 1413

3N/33E-28dc
start card #5183

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

JUL 18 1988

(1) OWNER:

Name Oregon State University
Address Columbia Basin Research Center, P.O. Box 370
City Fendleton State OR Zip 97801

WATER RESOURCES DEPT.
Well Number _____
SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County Umatilla Latitude _____ Longitude _____
Township 3N N or S, Range 33E E or W, WM.
Section 24 SW 1/4 SE 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Hwy. 11, Experiment Station Rd., Fendleton, OR 97801

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 280 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
10"	0 97	Cement	0 97	23 sacks
6"	97 280			

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:

Casing:	Diameter	From	To	Gauge	Steel		Plastic		Welded	Threaded
					✓					
	6"	+1	97	.250	✓				✓	

Liner: _____
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
70		280	1 hr.

Temperature of water _____ 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: _____

(10) STATIC WATER LEVEL:

50 ft. below land surface. Date 5-26-88
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 70

From	To	Estimated Flow Rate	SWL
70	79	3	
128	130	4	
142	156	20	
261	280	40	

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Clay soil	0	16	
Gray basalt	16	47	
Broken red & brown basalt, some clay	47	62	
Gray basalt	62	70	
Broken brown basalt, caving	70	79	WB
Gray basalt	79	128	
Brown basalt	128	130	WB
Gray basalt	130	142	
Soft red & gray basalt	142	156	WB
Gray basalt	156	187	
Soft red & gray basalt with green soapstone	187	203	
Black basalt	203	261	
Black basalt with green soapstone	261	280	WB

Date started 5-25-88 Completed 5-26-88

(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 well construction standards. Materials used and information reported above are true to my best 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 well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 1218
Signed Patrick C. Walker Date 6-13-88