

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

UMAT 3603 AUG 07 1987
 UMAT 3603

5N/28E-35d

WATER RESOURCES DEPT.
 SALEM, OREGON

(1) OWNER: Well Number: _____
 Name Mary Griggs
 Address Rt. 5, Box 5272
 City Hermiston State OR Zip 97838

(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:
 Soil Construction approval Yes No Depth of Completed Well 155 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
6"	0 25	Cement	0 25	12 sacks
6"	25 155			

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: 6"	±1	150	.250								
Liner:											

Final location of shoe(s) 150

(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"/>
						<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"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 45 Drawdown _____ Drill stem at 155 Time 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: _____

(9) LOCATION OF WELL by legal description:
 County Umatilla Latitude _____ Longitude _____
 Township 5N N or S, Range 28E E or W, WM.
 Section 35 ¼ SE ¼
 Tax Lot _____ Lot A Block _____ Subdivision _____
 Street Address of Well (or nearest address) Alpine Drive
Hermiston, OR 97838

(10) STATIC WATER LEVEL:
91 ft. below land surface. Date 7-14-87
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 96

From	To	Estimated Flow Rate	SWL
<u>96</u>	<u>145</u>	<u>6</u>	
<u>145</u>	<u>155</u>	<u>40</u>	

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
<u>Sand</u>	<u>0</u>	<u>61</u>	
<u>Black sand</u>	<u>61</u>	<u>96</u>	
<u>Sand</u>	<u>96</u>	<u>145</u>	<u>WB</u>
<u>Gravel</u>	<u>145</u>	<u>155</u>	<u>WB</u>

Date started 7-13-87 Completed 7-14-87

(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 7-30-87



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for
Well ID Number

Do not complete if the well already has a Well I.D Number.

I. OWNER INFORMATION

Current Owner Name (please print): Harry & Beckie Bither
Mailing Address: 80511 Alpine Drive
City: Hermiston State: OR Zip: 97838
Mailing Address (to send Well I.D.):
City: State: Zip:

II. WELL INFORMATION (Do not complete this section if the well report is attached.)

Township: 5 (North/South) Range: 28 (East/West) Section: 35
Tax Lot: 5N2835D000304 County: Umatilla SW 1/4 SE 1/4
Street Address of Well: City:
Owner at time the well was constructed, (if known): Mary Griggs
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Domestic, Irrigation
Date Well Constructed: 7/14/1987 Total Well Depth: 155 Casing Diameter: 6
Other Information:

SUBMITTED BY (please print): Marc Norton
PHONE: 503-986-0841 FAX:

Send application to Oregon Water Resources Department; 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.

For Official Use Only by the Oregon Water Resources Department:
Received Date: Well Log Number: UMAT 3603 Well Identification #: 101438