STATE OF OREGON

RECEIVED 5h/29E-22ce

PLEASE TYPE (WATER RESOURCES DEPT (for official use only)	
(1) OWNER:	(10) LOCATION OF WELL by legal description:	
Name Fred Carlson	County Umatillia 14 5W/4 of Section 22 of	
Address 203 Jefferson	Township (Township is North or South), Range (Range is East or West), WM.	
City clonatillia State ORE	Tax Lot Lot Block Subdivision	
(2) TYPE OF WORK (check):	MAILING ADDRESS OF WELL (or nearest address)	
	Progress Rd & Diagnol Rd.	
New Well 🔼 Deepening 🗆 Reconditioning 🗆 Abandon 🗆 If abandonment, describe material and procedure in Item 12.		
	(11) WATER LEVEL of COMPLETED WELL:	
(3) TYPE OF WELL: (4) PROPOSED USE (check):		
Rotary Air 🔏 Driven 🗆 Domestic 🔀 Industrial 🗆 Municipal 🗆 Thermal:	Depth at which water was first found 3 ft.	
Rotary Mud 🗆 Dug 🔲 Irrigation 🗆 Withdrawal 🗆 Reinjection 🗆	Static level 5 5 ft. below land surface. Date 7-27-2	
Other: Subje	Artesian pressure lbs. per square inch. Date	
	(12) WELL LOG: Diameter of well below casing	
(5) CASING INSTALLED: Steel Plastic	Depth drilled 183 ft. Depth of completed well 183 ft.	
Threaded Welded	Formation: Describe color, texture, grain size and structure of materials; and show thickness	
6 Diam from + ft. to 20 ft. Gauge 3	and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal	
To Diam. from	water-bearing strata.	
LINER INSTALLED: Steel Plastic Helded Welded		
Threaded Welded	MATERIAL From To SWL	
4" Diam. from — 3 ft. to 183 ft. Gauge 160 157		
(6) PERFORATIONS: Perforated? ☐ Yes ☐ No	Black Basalt 9 78	
Size of perforations in. by in.	Brown clay 78 95	
Do perforations from 163 ft. to 183 ft.	Black Bosalt 95 155	
	Rad Cinders 155 178	
ft. to ft.	Black Basalt 178 183	
perforations from ft. to ft.		
(7) SCREENS: Well screen installed? Yes No		
Manufacturer's Name		
Γγρe	At	
Diam		
Diam. Slot Size Set from ft. to ft.		
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	<u></u>	
Was a sum to the state of the s		
Was a pump test made? Yes X No If yes, by whom?	**************************************	
d: gal./min. with ft. drawdown after hrs.	= .:.	
7 - 1/1 - 1/2		
Air test gal./min. with drill stem at /83 ft. hrs.		
Bailer test gal./min. with ft. drawdown after hrs.		
Artesian flow g.p.m.		
erature of water 588 Depth artesian flow encounteredft.	Date work started 9-25 /completed 9:27-A5	
(9) CONSTRUCTION: Special standards: Yes \(\subseteq \) No \(\subseteq \)	Jaco work sourced	
Well seal—Material used	Date well drilling machine moved off of well 7-27 1985	
Well sealed from land surface to	(unbonded) Water Well Constructor Certification (if applicable):	
Diameter of well bore to bottom of seal	This well was constructed under my direct supervision. Materials used and	
Diameter of well bore below seal	information reported above are true to my best knowledge and belief.	
Amount of sealing materialsacks 🖸 pounds 🗆	[Signed]	
How was cement grout placed?		
now was cement grout placed?	(bonded) Water Well Constructor Certification:	
	Bond Issued by: (Surety Company Name)	
	On behalf of Brown & Brown Drilling T	
Was pump installed? Type HP Depth ft.	(type or print name of Water Well Constructor)	
Was a drive shoe used? 🎘 Yes □ No Plugs Size: location	This well was drilled under any included and a 142 to 144 to 144	
	This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief:	
Type of Water? depth of strata	576	
Method of sealing strata off	(Signed) (Water Well Constructor)	
Was well gravel packed? Yes No Size of gravel:	(Dated) (Dated)	
Gravel placed from ft. to ft.	(Daveu)	
NOTICE TO WATER WELL CONCEDITOTOR	WATER DESCRIPCES DETARMENTS CONTROL OF	

UMAT 3683



Last Update: 11/04/08

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):	Lawrence Grame	Ω	
Mailing Address: Y.D. Box	181		
City: Hermiston	State: OF	Zip: <u>91838</u>	
Mailing Address (to send Well I.D.):			
City:	State:	Zip:	
	t complete this section if the well report is a		
Township: 5N	(North/South) Range: 20 E	(East/West) Section: 77.	
Tax Lot:	(North/South) Range: 29 E County: Lmatila	1/4	1/4
Street Address of Well:		City:	
Owner at time the well was construct	ed, (if known):		
If the property had a different street a	ddress in the past:		
Use of Well (domestic, irrigation, con Date Well Constructed:	TION (Do not complete this section if the value in the value industrial, monitoring): Total Well Depth:	Casing Diameter:	
•	on G16971 r. Lawrence Grames		
PHONE:	FAX:	Ma Legier	
	soureces Department; 725 Summer St NE, s Well I.D. Numbers are mailed every Wedr		(503) 986-
Received Date:	Official Use Only by the Oregon Water Re. Well Log Number:	well Identification #:	