

STATE ENGINEER
Salem, Oregon

UMAT 4748 UMAT Well Record

STATE WELL NO. 6N-35-27K(1)
COUNTY Umatilla
APPLICATION NO. GR-1223

GR- 1183

OWNER: Charles Eiffert

MAILING ADDRESS:

LOCATION OF WELL: Owner's No.

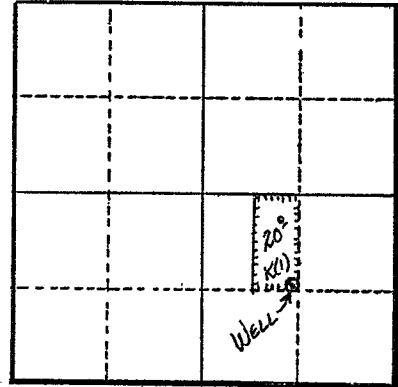
CITY AND STATE:

Milton-Freewater, Oregon

NW 1/4 SE 1/4 Sec. 27 T. 6 N. R. 35 E. W.M.

Bearing and distance from section or subdivision

corner 50' W. & 40' N. from SE cor. NW 1/4 SE 1/4 of Section 27.



Section 27

Altitude at well 800 ft.

TYPE OF WELL: Dug & Drilled Date Constructed 1910

Depth drilled 70 ft. Depth cased 40 ft.

CASING RECORD:

Dug & cased with 7 x 7 ft. concrete from 0 to 20 ft.
Drilled & cased with 8 in. steel from 20 to 40 ft.

FINISH:

AQUIFERS:

WATER LEVEL:

PUMPING EQUIPMENT: Type 6 in. turbine H.P. 10
Capacity 500 G.P.M.

WELL TESTS:

Drawdown 20 ft. after 500 hours G.P.M.
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F. 19

SOURCE OF INFORMATION G. R. Record

DRILLER or DIGGER

ADDITIONAL DATA:

Log N.A. Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

Irrigation of 20 acres.

UMAT 4748
WELL IDENTIFICATION FORM

CURRENT WELL OWNER:

Owner's Well Number

RECEIVED

Name: David Eiffert

JAN 21 1997

Mailing Address: 6819 409 Ave. SE

WATER RESOURCES DEPT.
SALEM, OREGON

City: Seaside State: WA Zip: 97138

If a well report is available for this well, please attach a copy of it to this form and return. It is not necessary for you to complete the remainder of the form if the well report is attached. If a well report is not available, please complete the remainder of the form to the best of your ability.

WELL LOCATION:

County: Umatilla Latitude: _____ Longitude: _____

UMAT 4748

Township: 6 (N) or S, Range: 35 (E) or W Section: 27 SE 1/4 NW 1/4

Tax Lot Number: 700

Street Address of Well (if different from above): Appleton Rd.
Milton-Fruwater

WELL INFORMATION:

Start Card Number: _____ Approx. Construction Date: 1910

Well Constructor: _____

Name of Owner at Time of Construction: Charles Eiffert

Well Depth (in feet): 70 Static Water Level (in feet): _____

Diameter of Exposed Well Casing (in inches): _____

Does this well have a formal water right associated with it? Yes: _____ No: _____ If yes:

Application #: _____ Permit #: _____ Certificate #: _____

Please Return Completed Form to:

**Oregon Water Resources Department
158 12th Street NE
Salem, OR 97310**

(Office use only)

Well Identification Number: 12496