

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

UMAT 50179
WELL I.D.# U02554

04N/27E/30AA

(START CARD) # 84839

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number _____
Name Jerry Christian
Address P.O. Box 826
City Hermiston State OR Zip 97838

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 175 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	99	Cement	0	99	22 SACKS
6"	99	175				

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	99	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 99

(7) PERFORATIONS/SCREENS:

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 Bailer Air Flowing Artesian
Yield gal/min 50 Drawdown _____ Drill stem at 17.5 Time 1 hr.

Temperature of water 61° 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 4N N or S Range 27E E or W. WM.
Section 36 NE 1/4 NE 1/4
Tax Lot 2601 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Junction T-847
Wheatland Rd., Hermiston, OR 97838

(10) STATIC WATER LEVEL:
58 ft. below land surface. Date 6-17-96
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 131

From	To	Estimated Flow Rate	SWL
131	144	10	58
144	167	20	58
170	175	20	58

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Sandy soil	0	1	
Gravel	1	18	
Brown clay	18	79	
Green clay	79	92	
Gray basalt	92	131	
Red & brown basalt	131	144	WB
Black basalt	144	167	WB
Gray basalt	167	170	
Black basalt	170	175	WB

RECEIVED

JUL 12 1996

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 6-17-96 Completed 6-17-96

(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 water supply well construction standards. Materials used and information reported above are true to the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 1218
Signed Patrick Wallace Date 6-24-96