

RECEIVED

UMAT 5028

62/34 SE-3566

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

DEC - 9 1987

(1) OWNER: Name Jew Branch, Address Rt # 2 Box 125A, City Milton Freewater, State OR, Zip 97862

Well Number: WATER RESOURCES DEPT. SALEM, OREGON

(9) LOCATION OF WELL by legal description: County Umatilla, Township 6 N, Range 34 E, Section 35 NW 1/4 NW 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well (or nearest address) Rt # 2

(2) TYPE OF WORK: [X] New Well, [] Deepen, [] Recondition, [] Abandon

(3) DRILL METHOD: [X] Rotary Air, [] Rotary Mud, [] Cable, [] Other

(4) PROPOSED USE: [X] Domestic, [] Community, [] Industrial, [] Irrigation, [] Thermal, [] Injection, [] Other

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

Table with columns: HOLE Diameter, SEAL Material, From, To, Amount sacks or pounds. Rows: 12-18 Cement 0-18 8, 10-18-39 Cement 32-39 3, 8-39 200

How was seal placed: Method [] A [] B [X] C [] D [] E

[] Other

Backfill placed from ft. to ft. Material

Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Rows for Casing and Liner

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

[] Perforations Method N/A, [] Screens Type, Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

[] Pump, [] Bailer, [X] Air, [] Flowing Artesian, Yield gal/min 30, Drawdown, Drill stem at 200, Time 1 hr.

Temperature of water 58°, Depth Artesian Flow Found

Was a water analysis done? [] Yes By whom NO

Did any strata contain water not suitable for intended use? [] Too little

[] Salty [] Muddy [] Odor [] Colored [] Other

Depth of strata:

(10) STATIC WATER LEVEL: 80 ft. below land surface, Date 11-14-87, Artesian pressure lb. per square inch, Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Estimated Flow Rate, SWL. Rows: 116-132 8 GPM, 192-200 21 GPM

(12) WELL LOG: Ground elevation

Table with columns: Material, From, To, SWL. Rows: Soil 0-18, Gravel 18-24, Basalt BRN 24-32, Gray 32-116, Gray w/clay sand 116-132, Gray Hard 132-192, Gray frac 192-200

Date started 11-13-87, Completed 11-14-87

(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, Signed, Date 11-15-87

RECEIVED

UMAT
5028

6W/35E-3566

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

DEC - 9 1987

(1) OWNER:

Name Jean Braugh Well Number: _____
Address RT #2 Box 125A WATER RESOURCES DEPT. SALEM, OREGON
City MILTON FREewater State OR Zip 97862

(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 _____ ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
12	0	18	Cement	0	18	8
10	18	39	Cement	32	39	3
8	39	200				

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
8	7	39	0.750	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>	<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Liner: NO

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method N/A
 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"/>

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

Pump Bailer Air Flowing
 Artesian
Yield gal/min 30 Drawdown _____ Drill stem at 200 Time 1 hr.

Temperature of water 58° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom NO
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 36 N or S, Range 35 E or W, WM.
Section 35 NW 1/4 NW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) RT #2

(10) STATIC WATER LEVEL:

80 ft. below land surface. Date 11-14-87
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
116	132	8 GPM	
192	200	22 GPM	

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Soil	0	18	
Gravel	18	24	
Basalt BRN	24	32	
" GRAY	32	116	
" GRAY w/Clay Sand	116	132	
" GRAY Hard	132	192	
" GRAY FRAC	192	200	

Date started 11-13-87 Completed 11-14-87

(unbonded) Water Well Constructor Certification:

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WWC Number _____
Signed _____ Date _____

(bonded) Water Well Constructor Certification:

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WWC Number _____
Signed Champion L... Date 11-15-87