

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

UMAT
 50318

RECEIVED

WELL I.D.# 208531

OCT 31 1996

(START CARD) # 88707

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

(1) OWNER:

Name Ken Clark
 Address 34455 Hwy 99E
 City Tangent State OR Zip 97389

Well Number _____

WATER RESOURCES DEPT.
 SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County Umatilla Latitude _____ Longitude _____
 Township 29E N or S Range 29E E or W. WM.
 Section 7 SE 1/4 NE 1/4
 Tax Lot 1404 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Loop Rd. Hermiston, OR 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 112 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>10"</u>	<u>0</u>	<u>30</u>	<u>Bentonite</u>	<u>0</u>	<u>30</u>	<u>19 sacks</u>
<u>6"</u>	<u>30</u>	<u>112</u>				

How was seal placed: Method A B C D E

Other Poured 3/8" bentonite

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: <u>6"</u>	<u>71</u>	<u>110</u>	<u>.250</u>	<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) 110

(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"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>50</u>		<u>112</u>	<u>1 hr.</u>

Pump Bailer Air Flowing Artesian

Temperature of water 60° 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: _____

(10) STATIC WATER LEVEL:

57 ft. below land surface. Date 10-15-96
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 101

From	To	Estimated Flow Rate	SWL
<u>101</u>	<u>112</u>	<u>50</u>	<u>57</u>

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
<u>Sandy soil</u>	<u>0</u>	<u>3</u>	
<u>Gravel</u>	<u>3</u>	<u>22</u>	
<u>Brown clay</u>	<u>22</u>	<u>101</u>	
<u>Gravel</u>	<u>101</u>	<u>112</u>	<u>WB</u>

Date started 10-15-96 Completed 10-15-96

(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 Peterson Wallace Date 10-22-96