STATE OF OREGON

WATER SUPPLY WELL REPORT WATER RESOURCES DEPT. Well I.D. # L13830

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(START CARD) # 09836/

	RESOURCES DEPT. EM, OREGON (START CARD) #_	09836	
(1) OWNER: Well Number	(0) LOCATION OF YURY		
Name Smed berg Addition Water Assn. Inc.	(9) LOCATION OF WELL by legal description County (Inati) Latitude	iption: Longitude	
Address 46161 Adams Rd.	Township 31 N or S Range	<u> </u>	or W. WM.
City Fendleton State OR Zip 9780. (2) TYPE OF WORK	Section 32 NE 1/4 Tax Lot 900 Lot Block	NW 1/4	
New Well Deepening Alteration (repair/recondition) Abandonment	Street Address of Well (or nearest address)	Subdivisi	on A
(3) DRILL METHOD:	Pendleton OB	97801	5 /10.
	(10) STATIC WATER LEVEL:	1 / 001	
Other	ft. below land surface.	Date 4	5-15-97
(4) PROPOSED USE:	Artesian pressurelb. per square	inch. Date	, <u>, , , , , , , , , , , , , , , , , , </u>
Domestic Community Industrial Irrigation	(11) WATER BEARING ZONES:		
Thermal Injection Livestock Other (5) BORE HOLE CONSTRUCTION:			
	Depth at which water was first found	7	
Special Construction approval Tes No Depth of Completed Well 71 ft Explosives used Yes Type Amount			
HOLE SEAL	From To	Estimated Flow F	Rate SWL
Diameter France To 14 14	127 159	20	24
12" 0 18 Cement 0 124 50 Sacks or pounds	269 276	60+	24
10" 18 124 SUSACKS			
8" 124 278			
How was seal placed: Method A B C D E	(12) WELL LOG:		
Other	Ground Elevation		
Backfill placed fromft. toft. Material	Material	F m	T
Gravel placed from ft. to ft. Size of gravel	Clav Soil	From To	SWL
(6) CASING/LINER:	Gravel	3 //	
Diameter From To Gauge Steel Plastic Welded Threaded	Brown basalt, proken	11 17	
Casing: 4 / 124-250 12	Grav basalt	17 57	
	Brown baselt	25 7 2	
	Grav basalt	68 71	
	Black basalt with	71 91	
Liner:	green soapstone		+
	Grav baselt	91 /27	-
Final location of shoe(s) /24	Bray+brown basalt	127 159	
(7) PERFORATIONS/SCREENS:	Brown basalt	159 178	100
Perforations Method	Gray basalt	178 26	7
Screens Type Material Slot Tele/pipe	Black basalt, broken,	2109 271	WB
From To size Number Diameter size Casing Liner	with green soapstan		
	Gray Basalt	276 276	2
	/		
	Note: Special Standards		
	approval attached		
	, ,		
(8) WELLTESTS: Minimum testing time is 1 hour	D		
testing time is 1 nour	Date started <u>5-12-97</u> Completed		97
□Pump □Bailer PAir Flowing	(unbonded) Water Well Constructor Certification:		_
Yield gal/min Drawdown Drill stem at Time	I certify that the work I performed on the construct of this well is in compliance with Oregon water supply	u wall cometeration	-4- 1 1
807 278 1hr.	Materials used and information reported above are tru and belief.	e to the best of my	knowledge
		mia v	
	Signed	WC Number	
Temperature of water 59° Depth Artesian Flow Found	(bonded) Water Well Constructor Certification:	Date	
Was a water analysis done? Yes By whom	•	on outliers t	
Did any strata contain water not suitable for intended use? Too little	I accept responsibility for the construction, alteration, or abandonment work erformed on this well during the construction dates reported above. All work		
Salty Muddy Odor Colored Other	performed during this time is in compliance with Oreg construction standards. This report is true to the best of	On water complex	.11
Depth of strata:		WC Number	2/R
	Signed alread Walls	Deta /	11-00