

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

JUL 22 1998

RECEIVED
SEP 24 1998

AMENDED

L14309

106024

(START CARD) #

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

(1) OWNER:

Name Terry Domack Well Number _____
Address 6010 S.W. 37th
City Pendleton State OR Zip 97801

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
14	0	18	Cement	-2	-18	10 SACK
12	18	54	Cement	54	28	12 SACK
8	54	398				

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:

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing: 10"	10"	+1	39	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 8"	8"	-54	34	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 10"-39', 8"-54'

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
NA							

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

Yield gal/min	Drawdown	Drill stem at	Time
200 50 Gpm		383	1 hr.
29 Gpm		308	
18 Gpm		283	

Temperature of water 69°F 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: _____

WATER RESOURCES DEPT.
SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County Umatilla Latitude _____ Longitude _____
Township 2 N or S Range 32 E or W. WM.
Section 16 NW 1/4 NW 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:

247 ft. below land surface. Date 6-24-98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 35 Feet

From	To	Estimated Flow Rate	SWL
35	37	200 GPM	12
305	316	20 GPM	247
352	362	55 GPM	

(12) WELL LOG:

Material	From	To	SWL
S&H	0	6	
Clay	6	10	
Cement Gravel	10	35	
Gravel	35	37	12'
Brown Basalt	37	39	
Black Basalt	39	63	
Clay & Brown Broken Basalt	63	96	
Black Basalt	96	117	
Red Clay	117	125	
Brown Basalt	125	160	
Black Basalt	160	215	
Brown Basalt	215	219	
Red Basalt	219	226	
Brown Basalt	226	290	
Brown Basalt Broken	290	294	
Black Basalt	294	301	
Brown Basalt Broken	301	305	
Brown sand yellow ss	305	316	
Brown Basalt	316	331	
Light yellow clay	331	342	

Date started 06-22-98 Completed 06-24-98

(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.

Signed A. Bowman WWC Number 01663 Date 06-25-98

(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.

Signed Terry Burd WWC Number 544 Date 6-24-98

Umat 51777

RECEIVED

JUL 22 1998

RECEIVED UMAT 51777 Page 2 of 2 SEP 24 1998

STATE OF OREGON WATER RESOURCES DEPT. WATER SUPPLY WEISSAHOE OREGON (as required by ORS 537.765)

WELL I.D. # L 14309 START CARD # 106024

Instructions for completing this report are on the last page of this form SALEM, OREGON

(1) OWNER: Well Number _____ Name Terry Womack Address 610 S.W. 37th City Pendleton State OR Zip 97801

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

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

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] 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, From, To, SEAL Material, From, To, Sacks or pounds

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: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS: 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 [] Air [] Flowing Artesian. Yield gal/min, Drawdown, Drill stem at, Time 1 hr.

Temperature of water _____ 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 2 N or S Range 32 E or W. WM. Section 16 NW 1/4 NW 1/4 Tax Lot 100 Lot _____ Block _____ Subdivision _____ Street Address of Well (or nearest address) _____

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

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation _____

Table with columns: Material, From, To, SWL. Entries include Black Basalt Brackwi, Brown Basalt, Black Basalt Brackwi, Black Basalt.

Date started 6/22/98 Completed 6/24/98

(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.

Signed A Boman WWC Number 1663 Date 6-25-98

(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.

Signed Larry Burt WWC Number 544 Date 6-24-98