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

SEP 25 1998

WELL I.D. # 20534
START CARD # 100734

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

(1) OWNER: Butch Therman Well Number _____
Name Butch Therman
Address 602 NW 10th
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 481 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	18				
10"	18	20	Port II	0	18	7 sacks
6"	20	481				

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:	8"	1	20	125		☒	☐	☐	☐
Liner:						☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:		Method		Material	
☐ Perforations		Type		Type/pipe size	
☐ Screens		Type		Type/pipe size	
From	To	Slot size	Number	Diameter	Casing
					☐
					☐
					☐
					☐
					☐

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

☐ Pump	☐ Bailer	☒ Air	☐ Flowing
Yield gal/min	Drawdown	Drill stem at	Time
30		481	1 hr.
8		400	

Temperature of water 60F 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 28 SE 1/4 SE 1/4
Tax Lot 801 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
331 ft. below land surface. Date 9-22-98
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 376

From	To	Estimated Flow Rate	SWL
376	399	8 gpm	
477	481	30 gpm	331

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Soil	0	5	
Cemented gravel	5	18	
Hard Black	18	100	
Red	100	130	
Brown	130	227	
Red w/ white claystone	227	245	
Grey	245	258	
Black w/ blue claystone	258	262	
Black	262	306	
Black/Red	306	310	
Red	310	332	
Black/Red w/ white claystone	332	337	
Black	337	360	
Black/Red	360	376	
Black Scoria Claystone	376	399	
Black/Red	399	403	
Black/Red Claystone	403	410	
Black	410	477	
Black w/ Green tint	477	481	

Date started 9-16-98 Completed 9-22-98

(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 [Signature] WWC Number 1588 Date 9-22-98

(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 [Signature] WWC Number 544 Date 9-22-98