AUG 1 6 1989

WATER RESOURCES DEPT.
SALEM, OREGON

UMAT 5318

3N/31E/22ca

(START CARD) # 165066

STATE OF OREGON

WATER WELL REPORT

(as required by ORS 537.765)

(1) OWNER:

Well Number: _____

Name: Henry Jonengon

Address: star route

City: Pendleton State: Ore Zip: 97801

(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 725 ft.

Explosives used Yes ☐ No ☑ Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
7 7/8	605	725				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☐ Other N A

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:					☐	☐	☐	☐
					☐	☐	☐	☐
	N A				☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____

☐ Screens Type _____ Material _____

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
150		600	1 hr.

Temperature of water 68° 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: _____

(9) LOCATION OF WELL by legal description:

County Umatilla Latitude _____ ' " Longitude _____ ' "

Township 3N N or S, Range 31E E or W, WM.

Section 22 NE ¼ SW ¼

Tax Lot _____ Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:

400 ft. below land surface. Date 7-24-89

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
610	630	100	400
695	720	150	400

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Red Basalt	610	630	
BROWN	630	650	
Black	650	695	
Red	695	710	
Black	710	715	
Red	715	720	
Black	720	725	

Date started 7-23-89 Completed 7-24-89

(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 5414

Signed Terry Burrod Date 7-24-89

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER

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