

STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(As required by ORS 337.765)

UMAT  
53028

WELL I.D. # 34874  
START CARD # 90373

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

(1) OWNER: Well Number \_\_\_\_\_  
Name Jolly Large  
Address 80508 Wiscley St  
City Hermiston State OR Zip 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 160 ft.  
Employees used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE SEAL

Diameter	From	To	Material	From	To	Seals or pounds
10	0	23	Bentonite	0	23	18 S&S
6	23	160				

How was seal placed: Method  A  B  C  D  E  
 Other dry haul  
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: 6	1	142	350	<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) 142

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Type	Casing	Liner
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>

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

	Pump	Bailer	Air	Flowing
Yield gal/min	Drawdown	Drill stem	Time	Artesian
30			160	

Temperature of water 51 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 S Range 28 E or W. WM.  
Section 36 SE 1/4 310 1/4 Sahara  
Tax Lot 960 Lot 7 Block \_\_\_\_\_ Subdivision desert est  
Street Address of Well (or nearest address) SAME

(10) STATIC WATER LEVEL:  
75 ft. below land surface. Date 5-12-00  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 75

From	To	Estimated Flow Rate	SWL
75	150	30	75

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Sand	0	175	
Sand & gravel	135	142	75
fractured Basalt	142	155	
Block Basalt	155	160	

**RECEIVED**  
MAY 25 2000  
**RECEIVED**  
WATER RESOURCES DEPT.  
SALEM, OREGON  
OCT 3 8 2000

Date started 5-11-00 Completed 5-12-00  
(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 \_\_\_\_\_ WWC Number \_\_\_\_\_ 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.

Signed J. Brown WWC Number 258 Date 5-12-00