

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

WATER RESOURCES DEPT
SALEM, OREGON

Umat 5405 6N/35E/28a
(START CARD) # 15976

(1) OWNER: Well Number: _____
Name ERNAST J JOHNSON
Address RITE 2 BOX 357
City MILWAUKEE State OR Zip 97802

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

HOLE SEAL
Diameter From To Material From To Amount sacks or pounds
10 0 20 Bentonite 0 20 12
6 20 100

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: 6 71 59 250
Liner: 4 5/8 40 100

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____
From To Slot size Number Diameter Tele/pipe size Casing Liner
60 100 1/2x6 124

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem at Time
30 _____ 100 1 hr.

Temperature of water 57.0 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom None
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 6 N 35 Range 35 E 1/4 W.M.
Section 28 3E 1/4 NE 1/4
Tax Lot 504 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:
22 ft. below land surface. Date 4-13-90
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 30

From	To	Estimated Flow Rate	SWL
30	34	15	22
60	100	30	22

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Soil	0	16	
Gravel & clay	16	30	
Cement Gravel	30	100	22

Date started 4-12-90 Completed 4-13-90

(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.
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 well construction standards. This report is true to the best of my knowledge and belief.
Signed Clarence Summers WWC Number 975
Date 4-27-90