

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.265)

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

WELL ID. # L _____
START CARD # _____

(1) LAND OWNER: Name **TIM COE**, Address **52215 Record Lane MF**, City **MF**, State **OR**, Zip **97862**

(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 **33** ft, Explosives used Yes No

HOPE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
0/10	0 35	SILT	0 35		18 Sacks
10	35 42	Gravel	35 42		9 Sacks

How was seal placed: Method A, B, C, D, E
Backfill placed from: ft to ft, Material _____
Gravel placed from: ft to ft, Size of gravel _____

(6) CASING/LINER: Casing Diameter **6** In, Gauge **120**, Material **ORBOX**
Liner Diameter **4 1/2** In, Gauge **110**, Material **SS**, Welded
Drive Shoe used: Inside Outside, None
Final location of sheets: **1201**

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Int./pipe size	Casing	Liner
110	155	1"	40	1"			<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
Pump: Yield gal/min **80**, Drawdown **110**, Drill stem at _____, Time _____
Flowing: Artesian

Temperature of water **53°**, Depth Artesian Flow Found _____
Was a water analysis done? Yes No 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**, Township **6** N, Range **35** W, Section **1100**, Block _____, Subdivision _____, Street Address of Well (or nearest address) **52215 Record Lane MF**

(10) STATIC WATER LEVEL: **33** ft below land surface, Date **Aug 1980**, Artesian pressure _____ lb per square inch, Date _____

(11) WATER BEARING ZONES: Depth at which water was first found **96**

From	To	Estimated Flow Rate	SWL
96	155	80 GPM	33

(12) WELL LOG: Ground Elevation _____

Material	From	To	SWL
SILT	0	35	
Gravel	35	36	
Cemented Gravel	36	42	
Cemented Gravel	42	85	
Gray SILT	85	87	
Blue clay	87	96	
Cemented Gravel	96	155	33
Gray SILT			
Cemented Gravel			
Brown SILT			

Created From Driller Logs
RECEIVED
APR 09 2001
WATER RESOURCES DEPT. SALEM, OREGON
Date started **Aug 1980**, Completed **Aug 1980**

(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 _____, Date _____, WWC Number _____

(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 **David Spotts**, Date **Feb 2001**, WWC Number **256**