

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

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

WELL I.D. # LW 129759  
START CARD # 711-128  
L 38959

Umat  
54264

(1) OWNER: Well Number \_\_\_\_\_  
Name Tom Coffelt  
Address 32005 Diagonal Rd  
City Hermiston State Oregon Zip 97183

(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 203 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12	0	20	Hekeplug	0	20	19 Sacks
8	20	73	Grout	52	73	700 #
6	73	203				

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	Material			
				Steel	Plastic	Welded	Threaded
8	12	63	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6	53	73	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: \_\_\_\_\_

Final location of shoe(s) 63, 73

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Tele/pipe size	Casing		Liner	
							Perforations	Screens	Method	Type
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
							<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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
<u>130</u>	<u>—</u>	<u>299</u>	<u>1 hr.</u>

Temperature of water 56° 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 4  N or S Range 29  E or W. WM.  
Section 6 hw 1/4 SW 1/4  
Tax Lot 62700 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 32005 Diagonal Rd

(10) STATIC WATER LEVEL:  
20 ft. below land surface. Date 4-30-01  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

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

From	To	Estimated Flow Rate	SWL
40	70	30	—
180	199	30	20

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

Material	From	To	SWL
Blow Sand	0	22	
Brown coarse sand	20	53	
Fine Brown sand	53	59	
sand + gravel	59	63	
Hard Black Basalt	63	171	
Hard Gray Basalt	171	180	
Soft Black Basalt (with clay stone (water)	180	199	20
med hard Black Basalt	199	203	

<b>RECEIVED</b>	<b>RECEIVED</b>
JUL 18 2001	AUG 12 2005
WATER RESOURCES DEPT SALEM, OREGON	WATER RESOURCES DEPT SALEM, OREGON

Date started 4-29-01 Completed 4-30-01

(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 Zyl O. Omar Date \_\_\_\_\_  
WWC Number 1719