

UMAT 54349
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STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

SEP 07 2001

WATER RESOURCES DEPT.
SALEM, OREGON

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

WELL ID. # L 50248

START CARD # 130159

(1) LAND OWNER

Name A BAR LLC Well Number _____
Address P.O. Box 2003
City DALE State OREGON Zip 97180

(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 282 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12"	0	20'	PTD CAN	0	20	7
8"	20'	282'				

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:	8"	+2	100	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	6"	+2	282	250	☒	☐	☒	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None
Final location of shoe(s) 8" SHOE 100' 6" SHOE 282'

(7) PERFORATIONS/SCREENS:

☒ Perforations Method DOWN HOLE PERFORATOR
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
222'	282'	1/8" x 1"	560	8		☐	☒
						☐	☐
						☐	☐
						☐	☐

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

	Yield gal/min	Drawdown	Drill stem at	Flowing Artesian	Time
	25 gpm		282'	☒	1 hr.
	25 gpm		262'	☐	
	20 gpm		242'	☐	

Temperature of water 54° 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 6 N or S Range 32 E or W. WM.
Section 27 C 1/4 C 1/4
Tax Lot 2603 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) MIDDLE OF FOREST
NEAR THE HOUSE 100' FROM SHOP

(10) STATIC WATER LEVEL:

185' ft. below land surface. Date 08-08-01
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
240'	260'	10 gpm	135'
270	282	25 gpm	185'

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
SOIL	0'	1'	
BROKEN BROWN	1'	30'	
BLACK	30'	40'	
BROKEN BROWN	40'	60'	
HARD FRACTURED NO CLAY	60'	95'	
BLACK SAND	95'	115'	
BROKEN BLACK	115'	174'	
BROWN CLAY	174'	190'	
RED, WHITE, BROWN	190'	225'	
BROWN CLAY	225'	240'	
RED & BROWN	240'	270'	
BROWN SAND w/CLAY	270'	282'	185'

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OCT 31 2001

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Date started 7-5-01 Completed 08-07-01

(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.

Signature [Signature] WWC Number 1731 Date 08-08-01

(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.

Signature Gary Burt WWC Number 544 Date 08-08-01