

RECEIVED UMAT 54387

Amended *

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

OCT 01 2001

UM9+ 54387

WELL I.D. # L. ~~941922~~ 91480 START CARD # 91480 *

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

(1) LAND OWNER: Name STEVEN Koester, Address 33009 W. Spearman Rd, City Hermiston, State OR, Zip 97838

(2) TYPE OF WORK: [X] New Well [] Deepening [] Alteration [] Abandonment

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 39 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Sacks or pounds. Row 1: 16, 0, 40, Bentonite, 0, 21, 32 SKS

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other Dry granular. Backfill placed from 0 ft. to 40 ft. Material. Gravel placed from 0 ft. to 21 ft. Size of gravel.

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Casing: 12, 0, 28, 28, [X], [], [X], []. Liner: 12, 38, 40, [], [], [], [].

Drive Shoe used [] Inside [] Outside [X] None. Final location of shoe(s).

(7) PERFORATIONS/SCREENS: Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: 28, 38, .60, 12, [X], [].

(8) WELL TESTS: Minimum testing time is 1 hour. Table with columns: Yield gal/min, Drawdown, Drill stem at, Time. Row 1: 3004, [], 39, 1 hr.

Temperature of water 58°. Depth Artesian Flow Found. Was a water analysis done? [] Yes [] No. 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 5 N or S Range 29 E or W WM, Section 29 NE 1/4 NW 1/4, Tax Lot 300, Lot, Block, Subdivision, Street Address of Well Spearman Rd Hermiston

(10) STATIC WATER LEVEL: 21 ft. below land surface. Date 9-25-01. Artesian pressure lb. per square inch. Date.

(11) WATER BEARING ZONES: Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 21, 38, 300+, 21.

(12) WELL LOG: Ground Elevation.

Table with columns: Material, From, To, SWL. Row 1: Sand, 0, 5. Row 2: Cemented gravel, 5, 21. Row 3: pea gravels, 21, 38, 21. Row 4: Black Basalt, 38, 40.

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WATER RESOURCES DEPT SALEM, OREGON

Date started 9-24-01 Completed 9-25-01

(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 Date WWC Number 259

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OCT. 01 2001

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT.
SALEM, OREGON

WELL I.D. # L 91479

START CARD # 91480

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

(1) LAND OWNER Well Number _____
Name STEVEN KOESTER
Address 33009 W. Spearman Rd
City HELMISTON 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 39 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
<u>16</u>	<u>0</u> <u>40</u>	<u>Bestock</u>	<u>0</u> <u>21</u>	<u>32</u>	<u>SKS</u>

How was seal placed: Method A B C D E
 Other Dry granular
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: <u>12</u>	<u>+1</u>	<u>28</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	<u>12</u>	<u>38</u>	<u>40</u>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type Cook Material SS

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>28</u>	<u>38</u>	<u>60</u>		<u>12</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 300+ Drawdown _____ Drill stem at 39 Time 1 hr.

Temperature of water 58° 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 5 N or S Range 29 E or W. WM.
Section 29 NE 1/4 NW 1/4
Tax Lot 300 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Spearman Rd Helmiston

(10) STATIC WATER LEVEL:
21 ft. below land surface. Date 9-25-01
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 21

From	To	Estimated Flow Rate	SWL
<u>21</u>	<u>38</u>	<u>300+</u>	<u>21</u>

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
<u>Sand</u>	<u>0</u>	<u>5</u>	
<u>Cemented gravel</u>	<u>5</u>	<u>21</u>	
<u>pea gravel</u>	<u>21</u>	<u>38</u>	<u>21</u>
<u>Black Basalt</u>	<u>38</u>	<u>40</u>	

Date started 9-24-01 Completed 9-25-01

(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 _____ 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 [Signature] WWC Number 259 Date 9-25-01