

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

umatt
 54394
 WELL I.D. # L 47074
 START CARD # 138366

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

(1) LAND OWNER Well Number 1
 Name Chris + Jane Smith
 Address 208 S.E. 17th St.
 City Milton Free Water 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 174 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	32'	Bentonite	0	32'	1750 # lbs
6"	32	174				

How was seal placed: Method A B C D E
 Other pour
 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"	0	117	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 5"	109	174		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 117'

(7) PERFORATIONS/SCREENS:
 Perforations Method SKILL Saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
109'	174'	1/8 x 7"	325	5"	20'	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
25	9		1 hr.

Temperature of water 56° Depth Artesian Flow Found _____
 Was a water analysis done? NO Yes By whom _____
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: 60-70

(9) LOCATION OF WELL by legal description:
 County umatilla Latitude _____ Longitude _____
 Township 6 N or S Range 35 E or W. WM.
 Section 13C SW 1/4 NW 1/4
 Tax Lot 500 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 85627 Berk Ln
Milton Free Water OR 97862

(10) STATIC WATER LEVEL:
22 ft. below land surface. Date 9-17-01
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 60'

From	To	Estimated Flow Rate	SWL
60	70	5-10	45'
130	174	25-35	22'

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Loess - Top soil	0	7	
clay stone	7	15	
clay - Brown	15	32	
Gobbles - med-small	32	35	
cobbles - small	35	40	
sand - Fine	40	61	
cobbles - small - clay Br	61	70	
clay - Br. cobbles - sm	70	115	
cobbles - small clay Br	115	125	
cobbles med clay gray	125	150	
cobbles small clay Br.	150	160	
cobbles med clay Br water	160	174	

RECEIVED	RECEIVED
OCT 09 2001	NOV 05 2001
WATER RESOURCES DEPT. SALEM, OREGON	WATER RESOURCES DEPT. SALEM, OREGON

Date started 9-10-01 Completed 9-17-01

(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.
 WWC Number _____
 Signed _____ 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.
 WWC Number 1589
 Signed Gerald L. Arching Date _____