

RECEIVED

STATE OF OREGON

WATER SUPPLY WELL REPORT OCT 17 2001

(as required by ORS 537.765)

WELL I.D. # L 50242

START CARD # 141402

Instructions for completing this report are on the back of this form.

WATER RESOURCES DEPT.
SALEM, OREGON

(1) LAND OWNER
Name John McBee
Address 1015 NW Gillan
City Pendleton State Or Zip 97801

(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 300 ft.
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Material		Sacks or pounds	
Diameter	To	From	To	From	To	From	To
12"	0	18"	18"	Port Cement	18"	0	5
10"	18"	128"	128"	" "	128"	120"	5
6"	128"	300"	300"				

Submerg
9 3/8"

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	128"	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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) 128'

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
60		300'	1 hr.
60		240'	
45		180'	

Temperature of water 60°F 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 1 (N or S) Range 32 (E or W) W.M.
Section 25 NW 1/4 NE 1/4
Tax Lot 6300 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 3/4 mi E. of Shaw Rd
3/4 mi S. of Spring Cr. Rd.

(10) STATIC WATER LEVEL:
13' ft. below land surface. Date 9-7-01
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
120	125	70	4
280	300	60	13

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Soil	0	10	
Gravel + Boulders	10	18	
Scoria	18	25	
Brown Clay	25	28	
Scoria + Broken Basalt	28	65	
Black Basalt	65	68	
Black + Brown Basalt			
w/ yellow clay	68	120	
Black Basalt w/ Blue Clay	120	125	
Black Basalt	125	150	
Black Basalt w/ Blue Clay	150	165	
Brown Basalt	165	175	
Black + Brown Basalt	175	200	
Black + Brown Basalt	200	230	
Black + Brown Basalt			
w/ yellow clay	230	245	
Grey Basalt	245	280	
Black + Brown Basalt			
w/ yellow clay	280	500	

Date started 8-28-01 Completed 9-7-01

(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 James H. McMurphy WWC Number 1700
Date 9-7-01

(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.
Signed Tarry Bund WWC Number 544
Date 9-7-01