

**STATE OF OREGON
WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

WELL I.D. # L 41929
START CARD # 116952

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

(1) LAND OWNER Well Number _____
Name Earl Brown & Sons
Address PO 249
City Milton Free Water State OR Zip 97882

(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: 1005
Special Construction approval Yes No Depth of Completed Well _____ ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds	
20	0	42	Cement	0	42	71	SFS
18	42	355	Cement	280	355	75	SFS
16	355	540	Cement	510	540	27	SFS
12	540	834					

Hole was sealed by 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:	16	0	353	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	12	327	540	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 16 @ 353 12" @ 327 & 540

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
2000+		1005	1 hr.

Temperature of water 62° Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Yes No
 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 35 E or W. WM.
Section 35 SW 1/4 NW 1/4
Tax Lot 1400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Winesap Rd Milton Free Water

(10) STATIC WATER LEVEL:
193 ft. below land surface. Date 2-14-02
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	190	20	40
520	535	100	193
757	798	1000	193
901	988	1000	193

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Silt and Gravels	0	37	
Cemented gravels	37	190	40
Silt & gravels	190	239	
Blue Clay	239	283	
Fractured Basalt	283	293	
Black Basalt	293	460	
Fractured / Blue Clay	460	535	193
Black Basalt	535	603	
Red Cinders	603	615	
Black Basalt	615	684	
Brown visicular	684	701	
Black Basalt	701	757	
visicular Basalt	757	798	
Black Basalt	798	884	
visicular Basalt	884	901	
visicular & Fractured	901	988	
Black Basalt	988	1005	

Date started 11-2-01 Completed 2-14-02

(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 [Signature] WWC Number 176E 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 2-15-02

RECEIVED
FEB 19 2002
WATER RESOURCES DEPT.
SALEM, OREGON