

STATE OF OREGON  
WATER SUPPLY WELL REPORT

WELL I.D. # L 56515  
START CARD # W147826

(as required by ORS 537.765)

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

(1) LANDOWNER Name John Mathwick Well Number \_\_\_\_\_  
Address 84938 Edwards Rd  
City Madras 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 115'  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
8"	0	85'				
8"	85'	115'				

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	6"	95'	115'	250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS:

Perforations Method skill saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
95'	115'	1/2"	96	6"	20'	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump  Bailer  Air  Flowing  Artesian

Yield gal/min	Drawdown	Drill stem at	Time
45	10		1 hr.

Temperature of water 59° Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  No  Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use?  No  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 35 E or W. WM.  
Section 20 SW 1/4 SE 1/4  
Tax Lot 1300 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 84938 Edwards Rd  
MA-F 97862

(10) STATIC WATER LEVEL:  
32 ft. below land surface. Date 2-5-03  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
85	115	35-50 gpm	32'

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
gravel-sm-fine	85	115	32'

clean out old well from 85'-115' put in 6" liner from 95'-115'

RECEIVED  
RECEIVED  
MAR 14 2003  
FEB 18 2003  
WATER RESOURCES DEPT. SALEM, OREGON

Date started 2-4-03 Completed 2-5-03

(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 Herald Hawley WWC Number 1587  
Date 2-7-03

**STATE OF OREGON**  
**WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

WELL ID. # L \_\_\_\_\_  
START CARD # W147826

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**(1) LAND OWNER** Well Number \_\_\_\_\_  
Name John Mathwick  
Address 84938 Edwards Rd  
City Milton-Freewater 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 \_\_\_\_\_

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Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
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Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	6"	95'	115'	250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

**(7) PERFORATIONS/SCREENS:**  
 Perforations Method SKILL SAW  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
95'	115'	1/8" X 1/2"	96	6"	20'	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

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M-F 97862

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**(12) WELL LOG:**

Ground Elevation \_\_\_\_\_

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WATER RESOURCES DEPT. SALEM, OREGON			

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Signed \_\_\_\_\_ WWC Number \_\_\_\_\_ Date \_\_\_\_\_

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Signed Herald Hawley WWC Number 1587 Date 2-7-03