

UMAT 54789
54.184

RECEIVED

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

APR 16 2003

WELL I.D. # L 54999
START CARD # 123771

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

(1) LAND OWNER

Name John Hansell Well Number SALEM, OREGON /
Address 28266 Stassard Hansell Rd
City Horemistan 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 543 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
			<u>None</u>			

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:

Casing:	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
	<u>10"</u>	<u>310</u>	<u>523</u>	<u>.250</u>	<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) 310 top Bottom 523

(7) PERFORATIONS/SCREENS:

From		To		Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
From	To	From	To						
				<u>None</u>				<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
	<u>None</u>		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 4 N or S Range 27 W or W. WM.
Section 27 NE 1/4 SW 1/4
Tax Lot 1891 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) off Stassard Hansell Rd

(10) STATIC WATER LEVEL:

329 ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
<u>523</u>	<u>543</u>		<u>329</u>

RECEIVED

JUL 23 2003

(12) WELL LOG:

Material	From	To	SWL
<u>Pulled old Liner out of well w Collars on Each Joint Install Liner Back in Iron 310 to 523 (10")</u>			
<u>This Casing That was in Hole was put in 1942</u>			
<u>Deviated @ 338' Bottom of 12" Casing</u>			

Date started 4-1-2003 Completed 4-09 2003

(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 Jody Rapant WWC Number 1669
Date 4-14-2003

(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 Jody Rapant WWC Number 1669
Date 4-14-2003