

James Bean Bloss **UMAT 54827** mat 54827

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 51324

START CARD # W152602

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

(1) LAND OWNER Well Number _____
 Name Bonnie Simson
 Address Stem Rd
 City Hamleton State Oregon Zip _____

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
12	0	20	4 in plug	0	20	11
8	20	160				

How was seal placed: Method A B C D E
 Other Peened
 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
8	0	160	32	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Drive Shoe used Inside Outside None
 Final location of shoe(s) 160

(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	Time
100+	—	159	1 hr.

Temperature of water 57° 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 5 N or S Range 28 E or W. WM.
 Section 36 SE 1/4 54 1/4
 Tax Lot 905 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Stem Rd. Lot 6

(10) STATIC WATER LEVEL:
95 ft. below land surface. Date 4-24-03
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
95	160	100+	95

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Dry Brown Sand	0	11	
Brown Sand	11	36	
Coarse Brown Sand	36	100	
Moist Brown Sand	100	138	
Fine Black Sand	138	152	
Sand & Gravel (water)	152	160	95

RECEIVED

AUG 04 2003

 WATER RESOURCES DEPT
 SALEM, OREGON

Date started 4-23-03 Completed 4-24-03

(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.

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 1719
 Signed John O. Amos Date 4-24-03

MAY 22 2003

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 Special Construction approval Yes No Depth of Completed Well 160 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
<u>12</u>	<u>0</u>	<u>20</u>	<u>Water Plug</u>	<u>0</u>	<u>20</u>	<u>17</u>
<u>8</u>	<u>20</u>	<u>160</u>	<u>—</u>			

How was seal placed: Method A B C D E
 Other Poured

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	<u>8</u>	<u>12</u>	<u>160</u>	<u>28</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 160

(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"/>

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

Pump	Bailer	Air	Flowing
Yield gal/min	Drawdown	Drill stem at	Artesian
		Time	
<u>100+</u>	<u>—</u>	<u>159</u>	<input type="checkbox"/>
			<input type="checkbox"/>

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 Depth at which water was first found 160

From	To	Estimated Flow Rate	SWL
<u>95</u>	<u>160</u>	<u>100+</u>	<u>95</u>

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
<u>Dry Brown Sand</u>	<u>0</u>	<u>11</u>	
<u>Brown Sand</u>	<u>11</u>	<u>36</u>	
<u>Coarse Brown Sand</u>	<u>36</u>	<u>100</u>	
<u>Moist Brown Sand</u>	<u>100</u>	<u>138</u>	
<u>Fine Black Sand</u>	<u>138</u>	<u>152</u>	
<u>Sand & Gravel (water)</u>	<u>152</u>	<u>160</u>	<u>95</u>

Date started 4-23-03 Completed 4-24-03

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 Signed _____ Date _____ WWC Number _____

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 Signed Zyle O. Amor WWC Number 1719 Date 4-24-03