

**STATE OF OREGON
WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

WELL I.D. # L 54738
START CARD # 147787

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

(1) LAND OWNER Well Number _____
Name Juan Olivera
Address 80488 Lonesome Dove Lane
City Hermiston 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 80 ft.
Explosives used Yes No Type _____ Amount _____

| HOLE | | | SEAL | | | |
|----------|------|----|-----------|------|----|-----------------|
| Diameter | From | To | Material | From | To | Sacks or pounds |
| 12" | 0 | 20 | Bentonite | 0 | 20 | 17 sacks |
| 8" | 20 | 80 | | | | |

How was seal placed: Method A B C D E
 Other Poured 3/8" bentonite chips
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" | ±1 | 79 | 250 | <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) 79

(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

| Yield gal/min | Drawdown | Drill stem at | Flowing Time |
|---------------|----------|---------------|--------------|
| 15 | | 80 | 1 hr. |

Temperature of water 61° 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 4N N or S Range 29E E or W. WM.
Section 6 NE 1/4 NW 1/4
Tax Lot 500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 32558 Quiggle Lane Hermiston, OR 97838

(10) STATIC WATER LEVEL:
15 ft. below land surface. Date 9-21-02
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 73

| From | To | Estimated Flow Rate | SWL |
|------|----|---------------------|-----|
| 73 | 80 | 15 | 15 |

(12) WELL LOG:
Ground Elevation _____

| Material | From | To | SWL |
|--------------|------|----|-----|
| Sandy soil | 0 | 3 | |
| Sand | 3 | 73 | |
| Sandy gravel | 73 | 80 | WB |

RECEIVED

MAY 23 2003

WATER RESOURCES DEPT
SALEM, OREGON

Date started 9-20-02 Completed 9-21-02

(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 _____ 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 Patrick Wallace WWC Number 1218 Date 9-27-02