

**STATE OF OREGON**  
**WATER SUPPLY WELL REPORT**  
 (as required by ORS 537.765)

WELL I.D. # L 65204  
 START CARD # W157281

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

(1) **LAND OWNER** Well Number \_\_\_\_\_  
 Name Bonnie Simpson  
 Address Stem Rd  
 City Hermiton State Oregon 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 155 ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
12	0 20	Hole Plug	0 20		19
8	20 155				

How was seal placed: Method  A  B  C  D  E  
 Other Peaced  
 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: 8	0	155	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
 Final location of shoe(s) 155

(7) **PERFORATIONS/SCREENS:**

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"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>50+</u>	<u>—</u>	<u>154</u>	1 hr.

Flowing  Artesian   
 Pump  Bailer  Air

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 or S Range 28 or W. WM. C  
 Section 36 SE 1/4 SW 1/4  
 Tax Lot 905 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) Stem Rd. Lot 1  
Hermiton

(10) **STATIC WATER LEVEL:**  
93 ft. below land surface. Date 5-30-03  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) **WATER BEARING ZONES:**

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

From	To	Estimated Flow Rate	SWL
<u>95</u>	<u>155</u>	<u>50</u>	<u>93</u>

(12) **WELL LOG:**

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

Material	From	To	SWL
Fine Sand	0	18	
Coarse Brown Sand	18	125	
Brown Sand	125	134	
Black Sand	134	141	
Sand & Gravel	141	156	93
GRAVEL	156	—	

**RECEIVED**  
**AUG 04 2003**  
 WATER RESOURCES DEPT  
 SALEM, OREGON

Date started 5-30-03 Completed 6-2-03  
**(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 Z. O. Moore Date 6-10-03