

STATE OF OREGON
WATER SUPPLY WELL REPORT

WELL I.D. # L 65824
START CARD # W165227

(as required by ORS 537.765)
Instructions for completing this report are on the last page of this form.

(1) LAND OWNER Name Jim WALTZER Well Number _____
Address 84049 Winesap Road
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 _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 327 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
16"	0	100	Nat Cement	155	60	46
14"	100	155	3/8 Bent	60	0	135 Sacks
10"	155	327				

How was seal placed: Method A B C D E
 Other Bentonite - poured
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:	10	113	262	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	8	247	327	.250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 262

(7) PERFORATIONS/SCREENS:

Perforations Method SKILL SAW
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
247	327	1/8 x 7	320	8"	8"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
70	13		3 hr.
125	24		6
150	30		1

Temperature of water 56° 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 6 or S Range 35 or W. W.M.
Section 22 NE 1/4 NW 1/4
Tax Lot 100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 85363 Winesap Road

(10) STATIC WATER LEVEL:
74 ft. below land surface. Date 5-5-05
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 87

From	To	Estimated Flow Rate	SWL
87	170	30	78
302	317	250	74

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Soil	0	30	
Brown clay	30	48	
Tight Med Gravel	48	108	78
Gravel - A little clay - brown	108	279	
Brown clay	279	283	
Light Brown Clay + Gravel	283	302	
Gravel - water	302	317	74
Brown Clay + Gravel	317	325	
Blue Clay	325	327	

Date started 3-30-05 Completed 5-5-05

(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 1639
Signed Mike Harding Date 5-15-05