

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

WELL I.D. # \_\_\_\_\_  
 START CARD: W183752

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

(1) **LAND OWNER** Well Number \_\_\_\_\_  
 Name JOHN RUTHVEN  
 Address 84547 WEIS Road  
 City Milton FREE WATER State ORE 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 \_\_\_\_\_ ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
6x6	0	52	NATIVE Fill	0	17	3 yds
			NATIVE Fill	17	20	3 yds
			NATIVE Fill	20	52	

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:**

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

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

(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"/>
						<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	Flowing Artesian	Time
			<input type="checkbox"/>	1 hr.
			<input type="checkbox"/>	
			<input type="checkbox"/>	

Temperature of water \_\_\_\_\_ 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. WM.  
 Section 26 NE 1/4 SE 1/4  
 Tax Lot 100 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 84504 WEIS Road

(10) **STATIC WATER LEVEL:**  
48 ft. below land surface. Date 3-29-07  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) **WATER BEARING ZONES:**

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

From	To	Estimated Flow Rate	SWL

(12) **WELL LOG:**

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

Material	From	To	SWL
6x6' Cement Lined Pit	TO	19'	
19' TO 52' OPEN PIT			
APPROX. 6'x6'			
Filled with NATIVE Fill			
TO 20'			
NEAT Cement (3 yds)		TO 17'	
NATIVE Fill TO 6'			

Date started 3-29-07 Completed 3-30-07

(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 MA 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.  
Mike Hardins WWC Number 1639  
4-3-07

**RECEIVED**  
 APR 01 2007  
 WATER RESOURCES DEPT  
 SALEM, OREGON