

STATE OF OREGON  
WATER SUPPLY WELL REPORT

WELL I.D. # L 83479  
START CARD # 123791

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

(1) LAND OWNER Well Number \_\_\_\_\_  
Name John White or Richard Smith  
Address P.O. Box 1751  
City Newmiston 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 1060  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL					
Diameter	From To	Material	From To	Sacks or pounds			
12"		Neat cement	420 549	288			
12"		Cement	397 537	3 yds.			

How was seal placed: Method  A  B  C  D  E  
 Other Plug Bottom pump w/ Tremie Pipe  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material cement  
Gravel placed from 549 ft. to 1060 ft. Size of gravel 3/4"

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:				<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"/>

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

(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  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 40+ Drawdown 0 Drill stem time \_\_\_\_\_  
Temperature of water 58' Depth Artesian \_\_\_\_\_  
Was a water analysis done?  Yes  No By whom \_\_\_\_\_  
Did any strata contain water not suitable for drinking?  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 30  E or W. WM.  
Section 3 NE 1/4 SE 1/4  
Tax Lot 401 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) off Kosmos Rd

(10) STATIC WATER LEVEL:  
383 ft. below land surface. Date 5-09-2007  
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
Fill Bottom 5 Casq w/ Gravel	to 549		
Run Tremie in Hole Pump	24 sk per yd of Neat cement	to 420	288
	2 in set up 3 days	12 yds.	
DRILL out to 537	Fill with water	set set water	
	was going Down @ 3 gal/hr		
Run Tremie Back in cement	w 3 yds from 397 to 537	385	
Fill Hole w/ water	Put 100 P.S.I on Head	Test stayed	
	Next day. Re drill out	cement + Sand Pump out	
	Pea Gravel		

Date started April 2, 2007 Completed May 7, 2007

(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 Judy Kasta WWC Number 1669  
Date 5-09-2007

(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 Judy Kasta WWC Number 1669  
Date 5-09-2007

RECEIVED

JUL 05 2007

WATER RESOURCES DEPT  
SALEM, OREGON

RECEIVED

MAY 14 2007

WATER RESOURCES DEPT  
SALEM, OREGON