### STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

## UMAT 56411

07-17-2009

WELL LABEL # L 94171

	<b>START CARD #</b> 1007101	
(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)	
First Name Last Name		OOF E/WWM
Company NORTH HILL WATER CORP.	County <u>Umatilla</u> Twp <u>5.00</u> N         N/S         Range_28           Sec <u>34</u> <u>SE</u> 1/4 of the <u>NE</u> 1/4         Tax Lot	3300 E
Address 31066 CECIL ST.	Tax Map Number Lot	
City HERMISTON State OR Zip 97838	Tax Map Number        Lot           Lat        '' or	DMS or DD
	Long' " or	DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	Street address of well     Nearest address	
Alteration (repair/recondition)	31066 CECIL ST.	
(3) DRILL METHOD	HERMISTON, OR 97838	
Rotary Air Rotary Mud Cable Auger Cable Mud		
Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi)	+ SWL(ft)
	Existing Well / Predeepening	
(4) <b>PROPOSED USE</b> Domestic Irrigation Community	Completed Well 07-16-2009	229
Industrial/Commericial Livestock Dewatering	Flowing Artesian? Dry Hole?	
Thermal Injection Other	WATER BEARING ZONES Depth water was first for	
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)		
Depth of Completed Well ft.	06-22-2009 110 123 5	
BORE HOLE SEAL sacks/	07-06-2009 155 159 15	107
Dia From To Material From To Amt lbs	07-06-2009 274 277 75	107
14 0 30 Bentonite 0 30 38 S	07-16-2009 521 542 75	229
10 30 440 Cement 120 140 27 S	07-16-2009 701 754 125	229
8 440 765 Cement 370 444 41 S	(11) WELL LOG Ground Floration	
How was seal placed: Method A B C D E		
	1	
Other bentonite poured	gravels 65	
Backfill placed fromft. toft. Material	gravels & tan Clay 110	
Filter pack fromft. toft. MaterialSize	blue clay 123	
Explosives used: Yes Type Amount	visicular basalt & blue clay 128	
(6) CASING/LINER	black basalt 131	
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	fractured basalt 155	
	black basalt 159	
$\bigcirc \bigcirc 8 \boxtimes 1 440 .250 \bigcirc \bigcirc \boxtimes 1$	hard grey basalt 240	) 274
	visicular basalt 274	277
	black basalt 277	291
	fractured basalt w/ seams of blue clay 291	
Shoe $\square$ Inside $\square$ Outside $\square$ Other Location of shoe(s) 136	blue clay 397 fractured basalt 423	
Temp casing Yes Dia From To To	fractured basalt 430	
(7) PERFORATIONS/SCREENS	fractured visicular basalt 521	
Perforations Method	black basalt 542	
Screens Type Material	fractued red basalt 616	
Perf/S Casing/ Screen Scrn/slot Slot # of Tele/		
creen Liner Dia From To width length slots pipe size	Date Started 06-18-2009 Completed 07-16-2	.009
	(unbonded) Water Well Constructor Certification	
	I certify that the work I performed on the construction, dee	
	abandonment of this well is in compliance with Oregon	
	construction standards. Materials used and information report the best of my knowledge and belief.	ried above are true to
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date	
Pump   Bailer   Air   Flowing Artesian	Electronically Filed	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed	
200 765 1	(bonded) Water Well Constructor Certification	
	I accept responsibility for the construction, deepening, altera	
	work performed on this well during the construction dates repo	orted above. All work
Temperature <u>57</u> °F Lab analysis Yes By	performed during this time is in compliance with Oregor	
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my kn	-
From To Description Amount Units	License Number_1766 Date 07-17-2009	
	Electronically Filed	
	Signed <u>BRANDON C BROWN (E-filed)</u> Contact Info (optional)	

**ORIGINAL - WATER RESOURCES DEPARTMENT** 

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

# WATER SUPPLY WELL REPORT -

### continuation page

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# 07-17-2009

# START CARD # <u>1007101</u>

# (5) BORE HOLE CONSTRUCTION BORE HOLE SEAL sacks/ Dia From To Amt Ibs Image: Dia of the second s

# (6) CASING/LINER

Casing Liner	Dia	+	From	То	Gauge	Stl	Plstc	Wld	Thrd
						$\bigcirc$	Ο		
						$\bigcirc$	$\bigcirc$		
						Q	Q	Ц	Ц
						$\square$	$\square$	Ц	
						$\mathbb{R}$	$\neg \exists$	Н	$\square$
						K	$\neg \exists$	H	$\square$
						K	H	Н	H
						$\overline{\mathbf{O}}$	ð		

### (7) PERFORATIONS/SCREENS

	Casing/ Liner	Screen Dia	From	То	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
						-		
						-		
				_				
L								

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

Yield gal/min	Drawdown	Drill stem/Pump dep	th Duration (hr)

### Water Quality Concerns

From	То	Description	Amount	Units
	_			_

# (10) STATIC WATER LEVEL

Water Bearing Zones

SWL Date	From	То	Est Flow	SWL(psi)	+ SWL(ft)
L	1	I	1	II	

# (11) WELL LOG

Material	From	То
black basalt	632	701
fractured brown/ visicular/hard blue clay	701	754
black basalt	754	765
		1.00
	1	·

### **Comments/Remarks**

