

STATE OF OREGON

WATER SUPPLY WELL REPORT

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

04-01-2010

WELL LABEL # L 100137

START CARD # 1009748

(1) LAND OWNER

Owner Well I.D. _____

First Name JEFF Last Name NEWTON

Company _____

Address 82106 S JUNIPER CANYON RD

City HELIX State OR Zip 97835

(2) TYPE OF WORK ☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud☐ Reverse Rotary ☐ Other _____(4) PROPOSED USE ☒ Domestic ☐ Irrigation ☐ Community☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering☐ Thermal ☐ Injection ☐ Other _____(5) BORE HOLE CONSTRUCTION Special Standard ☐ (Attach copy)

Depth of Completed Well 265.00 ft.

BORE HOLE			SEAL			sacks/	
Dia	From	To	Material	From	To	Amt	lbs
12	0	18	Bentonite	0	18	20	S
8	18	265					

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other POURED BENTONITE

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
☒	☐	8	☒	2	18	.25	☒	☐	☒	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐
☐	☐		☐				☐	☐	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____Temp casing ☐ Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type _____ Material _____

Perf/S	Casing/ Screen	green	Liner	Dia	From	To	Scm/slot width	Slot length	# of slots	Tele/ pipe size

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
300		1	265
150		1	150

Temperature 57 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County Umatilla Twp 5.00 N N/S Range 32.00 E E/W WM

Sec 16 SE 1/4 of the NW 1/4 Tax Lot 2600

Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD

Long _____ " or _____ DMS or DD

☒ Street address of well ☐ Nearest address

82106 S JUNIPER CANYON RD. HELIX, OR

(10) STATIC WATER LEVEL

Date SWL(psi) + SWL(ft)

Existing Well / Predeepening			
Completed Well	04-01-2010		37

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 100

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
04-01-2010	100	120	30		37
04-01-2010	135	150	120		37
04-01-2010	242	255	150		37

(11) WELL LOG

Ground Elevation _____

Material	From	To
SOIL		
BLACK BASALT	0	10
BLACK/BROWN BASALT	10	90
BLACK/BROWN BASALT	90	100
BLACK BASALT	100	120
BROKEN BLACK BASALT	120	125
BLACK BASALT	125	135
BROWN BASALT W/TAN CLAYSTONE	135	150
BLACK BASALT	150	242
BLACK BASALT W/TAN CLAYSTONE	242	255
BLACK BASALT	255	265

Date Started 03-30-2010 Completed 04-01-2010

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number 1735 Date 04-01-2010

Electronically Filed

Signed CHAD COURTNEY (E-filed)

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1881 Date 04-01-2010

Electronically Filed

Signed GARRY L. ZOLLMAN (E-filed)

Contact Info (optional)