UMAT 5669

RECEIVED JUN - 8 1992 WATER RESOURCES DEPT. SALEM, OREGON

6N/35E/34cd

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

(START CARD) # 30335

(1) OWNER: Well Number: SALEM, OREGON

Name Robert A Miller

Address 1615 Walnut

City Milton Freewater State OR Zip 97862

(2) TYPE OF WORK:

☐ New Well ☐ Deepen ☐ Recondition ☒ Abandon

(3) DRILL METHOD

☐ Rotary Air ☐ Rotary Mud ☐ Cable

☐ Other

(4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☒ Irrigation

☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes ☐ No ☒ Depth of Completed Well ____ ft.

Explosives used Yes ☐ No ☐ Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
4"x5"	0	40	Bentonite	37	40	60
				5	8	60

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☐ Other

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
			1 hr.

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 N or S, Range 35 E or W, WM.

Section 34 SE ¼ SW ¼

Tax Lot 1600 Lot ____ Block ____ Subdivision ____

Street Address of Well (or nearest address)

(10) STATIC WATER LEVEL:

Dry ft. below land surface. at 40 Feet Date 4-14-92

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
Bentonite	37	40	
Rock	8	37	
Bentonite	5	8	
Soil	0	5	

Date started 4-14-92 Completed 5-14-92

(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 well construction standards. Materials used and information reported above are true to my best 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 well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 575

Signed Clarence Summers Date 6-3-92

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER 9809C 3/88