

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

UMAT  
 5686

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JUN 24 1992

2N/32E/4ab  
 w-36066

(START CARD) #

**(1) OWNER:**

Name JIM HATLEY  
 Address PO BOX 485  
 City PILOT ROCK State OR Zip 97868

Well Number: \_\_\_\_\_

WATER RESOURCES DEPT.  
 SALEM, OREGON

**(9) LOCATION OF WELL by legal description:**

County Umatilla Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 2N N or S. Range 32E E or W. WM. \_\_\_\_\_  
 Section 4 NW  $\frac{1}{4}$  NE  $\frac{1}{4}$  \_\_\_\_\_  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) \_\_\_\_\_

**(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 500 ft.  
 Explosives used Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
<u>12</u>	<u>0</u>	<u>53</u>				
<u>8</u>	<u>53</u>	<u>500</u>	<u>PTD con</u>	<u>0</u>	<u>53</u>	<u>22</u>

How was seal placed: Method  A  B  C  D  E  
 Other TREMBLE

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

**(6) CASING/LINER:**

Casing/ Liner	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	<u>8</u>	<u>42</u>	<u>53</u>	<u>1.25</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoets) \_\_\_\_\_

**(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"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailer  Air  Flowing  
 Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>800±</u>		<u>400</u>	<u>1 hr.</u>

Temperature of water 62° 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: \_\_\_\_\_

**(10) STATIC WATER LEVEL:**

61 ft. below land surface. Date 6-19-92  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**

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

From	To	Estimated Flow Rate	SWL
<u>See Attached sheet</u>			

**(12) WELL LOG:**

Material	From	To	SWL
<u>See Attached sheet</u>			

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Date started 6-5-92 Completed 6-18-92

**(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.

Signed GREG PENNLS WWC Number \_\_\_\_\_  
 Date 6-18-92

**(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.

Signed Joy Bund WWC Number 544  
 Date 6-18-92

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WATER BEARING ZONES	FROM	TO	GPM	SWL	
BROKEN BROWN BASALT	153	159	60	61	
BLACK SOFT BASALT	352	327	80	62	
SOFT RED BASALT	454	497	800+	66	
MATERIAL	FROM	TO	SWL	GPM	TEMP
SOIL	0	3			
SMALL GRAVEL	3	10			
BIG GRAVEL	10	20			
SMALL GRAVEL AND SAND	20	40			
BROKEN BASALT	40	41			
HARD GRAY	41	53			
BLACK	53	88			
GRAY	88	135			
SOFT BROWN	135	140			
HARD GRAY	140	153			
BROKEN BROWN & RED	153	159		60	
BLACK	159	198			
GRAY	198	352			
BLACK SOFT	352	377		125	
HARD GRAY	377	454			
SOFT RED	454	493		800+	
BROKEN BROWN	493	497		800+	
HARD GRAY	497	500	61 FEET		
	500				
	0				
	0				
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