

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

UMAT
5703

RECEIVED

JUL 27 1992

2N/33E/7aa
 (START CARD) # 645100

WATER RESOURCES DEPT.

(1) OWNER: Well Number SALEM, OR
 Name Jowell Spiess
 Address PO Box 430
 City Pendleton State OR Zip 97801

LOCATION OF WELL by legal description:
 County Umatilla Latitude _____ Longitude _____
 Township 2N N or S. Range 33E E or W. WM. _____
 Section 07 NE ¼ NE ¼ _____
 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 _____ ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10	0	220				
8	220	490	NA			

How was seal placed: Method A B C D E
 Other NA
 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	Material			
					Steel	Plastic	Welded	Threaded
Casing:	10	0	60	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	1				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method NA
 Screens Type _____ Material _____

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	Drawdown	Drill stem at	Time
150		400	1 hr.
50		300	

Temperature of Water 66 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:
252 ft. below land surface. Date 7-17-92
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found NA

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
NA			
CLEANED OUT WELL FROM 470 TO 490			
THERE IS METAL ON BOTTOM FROM OTHERS, SOME TIME AGO			
DRILL 6" ON METAL AND THEN IT QUIT DRILLING			

Date started 7-16-92 Completed 7-20-92
 (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 PERRY STEPHEN P WWC Number 1532
 Date 7-20-92

(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 Jay Burt WWC Number 544
 Date 7-20-92