

UMAT 57630

STATE OF OREGON WATER SUPPLY WELL REPORT

WELL I.D. # L 112832

START CARD # 212216

(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

(1) LAND OWNER: Mark & Kris L. Mulvihill Well Number _____
 Name Mark & Kris L. Mulvihill
 Address 1045 S.E. 8th St.
 City Hermiston State OR Zip 97838

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

(3) DRILL METHOD:
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other _____

(4) PROPOSED USE:
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval ☒ Yes ☐ No Depth of Completed Well 380 ft.
 Explosives used ☐ Yes ☒ No Type _____ Amount _____

SEAL
 From To Sacks or pounds
 12" 0 20
 10" 20 100 Cement 0 100 18 sacks
 8" 100 340 Cement 0 340 40 sacks
 6" 340 380

Seal placed Method ☐ A ☒ B ☐ C ☐ D ☐ E
 Other Calculated seal: 18 sacks, 40 sacks

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: 8" +1 100 .250 ☒ ☐ ☒ ☐
 6" +1 340 .250 ☒ ☐ ☒ ☐
 Liner: ☐ ☐ ☐ ☐ ☐ ☐

Drive Shoe used ☐ Inside ☐ Outside ☐ None
 Final location of shoe(s) Cement shoes at 100 and 340

(7) PERFORATIONS/SCREENS:
☐ Perforations Method _____
☐ Screens Type _____ Material _____

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WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailor ☒ Air ☐ Flowing
 Yield gallon Drawdown Drill stem at Time
35 380 1 hr.

Temperature of water 60° Depth Artesian Flow Found _____
 Was a water analysis done? ☐ Yes By whom _____
 Do any strata contain water not suitable for intended use? ☐ Too little
 Quality ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____
 Depth of strata _____

(9) LOCATION OF WELL by legal description:
 County Umatilla Latitude _____ Longitude _____
 Township 2N N or S Range 32E E or W. WM.
 Section 16 SW 1/4 NE 1/4
 Tax Lot 2302 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 4212 S.W. Kirk Ext.
Pendleton, OR 97801

(10) STATIC WATER LEVEL:
242 ft. below land surface. Date 10-19-15
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 52 - 354

From	To	Estimated Flow Rate	SWL
52	58	3	18
210	240	8	130
354	375	35	242

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Silty soil	0	6	
Brown clay & cobbles	6	17	
Gray basalt	17	52	
Brown basalt	52	58	WB
Gray basalt	58	82	
Brown basalt	82	84	
Gray basalt	84	90	
Brown basalt	90	92	
Gray basalt	92	120	
Brown basalt	120	150	
Gray basalt	150	210	
Red & brown basalt	210	240	WB
Brown basalt	240	274	
Gray basalt	274	285	
Brown basalt	285	288	
Gray basalt	288	306	
Brown basalt	306	315	
Gray basalt	315	354	
Brown basalt	354	375	WB

Date started 9-17-15 Completed 10-19-15

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

Signed _____ WWC Number _____ 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
 Signed Patricia Wallace WWC Number 1218 Date 11-18-15