UMAT 5779

JAN 21 1993

WATER RESOURCES DEPT. SALEM, OREGON

2N/33E/31

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

(START CARD) # 45069

**(1) OWNER:** Well Number

Name Robert Bill

Address P.O. Box 1658

City Pendleton State OR Zip 97801

**(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 180 ft.

Explosives used ☐ Yes ☒ No Type Amount

| HOLE Diameter | From | To | SEAL Material | From | To | Amount sacks or pounds |
|---|---|---|---|---|---|---|
| 10 | 0 | 117.5 | PTD Cement | 0 | 117.5 | 39 |
| 6 | 117.5 | 180 | | | | |
| | | | | | | |
| | | | | | | |

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

☒ Other tremie

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: | 6 | +2 | 117.5 | .25 | ☒ | ☐ | ☒ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| 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 |
|---|---|---|---|
| 20 | | 165 | 1 hr. |
| | | | |
| | | | |
| | | | |

Temperature of Water 52° Depth Artesian Flow Found

Was a water analysis done? ☒ Yes By whom Coffey Lab

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 2N (N) or S. Range 33 (E) or W. WM.

Section 31 ¼ ¼

Tax Lot Lot Block Subdivision

Street Address of Well (or nearest address)

**(10) STATIC WATER LEVEL:**

68 ft. below land surface. Date 12-31-92

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 |
|---|---|---|---|
| Soil | 0 | 6 | |
| Black Basalt | 6 | 15 | |
| Brown Basalt | 15 | 20 | |
| Brown Basalt | 20 | 65 | |
| Black Basalt | 65 | 145 | |
| Black Basalt W/Bl, Rd | 145 | 153 | |
| Black Basalt /Blue SS | 153 | 160 | |
| Black Basalt /Blue | 160 | 165 | |
| Black Basalt | 165 | 180 | 68' |

Date started 12-29-92 Completed 12-31-92

**(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 1538

Signed Greg Dennis Date 12-31-92

**(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.

WWC Number 544

Signed Larry Burd Date 12-31-92

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER 9809C 10/91