

(1) LAND OWNER Owner Well I.D. WELL #10
First Name _____ Last Name _____
Company NF LAND LLC
Address 2885 SANFORD AVE SW #21711
City GRANDVILLE State MI Zip 49418

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (complete 2a & 10) Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrld
Casing:
Material From To Amt sacks/lbs
Seal: _____

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other TEST

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well 400.00 ft.
BORE HOLE

Dia	From	To	Material	From	To	Amt	sacks/lbs
12	0	19	Bentonite	0	19	13	S
10	19	400				Calculated	13
						Calculated	

How was seal placed: Method A B C D E
 Other POURED BENTONITE
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount _____ Actual Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrld
<input checked="" type="checkbox"/>	<input type="checkbox"/>	8	<input checked="" type="checkbox"/>	2	18	.25	<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"/>
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<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"/>

Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia _____ From _____ To _____

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

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
600		400	1

Temperature 65 °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 82 ppm
From _____ To _____ Description _____ Amount _____ Units _____

(9) LOCATION OF WELL (legal description)
County UMATILLA Twp 5.00 N N/S Range 36.00 E E/W WM
Sec 23 NW 1/4 of the NW 1/4 Tax Lot 200
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
 Street address of well Nearest address
N. FORK WALLA WALLA RIVER RD. MILTON FREEWATER, OR
PERMIT# G-17347

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	7/20/2018			60

Flowing Artesian? Dry Hole?
WATER BEARING ZONES Depth water was first found 140.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
7/13/2018	140	185	65			61
7/17/2018	303	328	500			60
7/19/2018	353	370	100			60

(11) WELL LOG Ground Elevation 1500.00

Material	From	To
Soil/Gravel	0	10
Black Basalt	10	140
Brown Broken Scoria	140	185
Black Basalt	185	240
Broken Black and Brown Basalt	240	261
Black Basalt	261	303
Broken weathered Brown Basalt	303	328
Black Basalt	328	353
Weathered Black and Brown Scoria	353	370
Black Basalt	370	400

Date Started 7/12/2018 Completed 7/20/2018

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, 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.
License Number 1986 Date 7/26/2018
Signed JACOB ENGBLOM (E-filed)

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, 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.
License Number 1881 Date 7/26/2018
Signed GARRY ZOLLMAN (E-filed)
Contact Info (optional) Garry Zollman

