

(1) LAND OWNER Owner Well I.D. _____
First Name WADE Last Name AYLETT
Company ROCK IT LLC
Address 7700 GUN CLUB RD
City HERMISTON State OR Zip 97838

(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: 10 0 87 .250
Material From To Amt sacks/lbs
Seal: Cement 0 20 4 Pounds

(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 _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
Depth of Completed Well _____ ft.
BORE HOLE
Dia From To Material From To Amt sacks/lbs
14 0 20 Cement 5 185 216 S
10 20 185 Calculated 48.33
Calculated

How was seal placed: Method A B C D E
 Other _____
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
 10 5 87 .250
Shoe Inside Outside Other Location of shoe(s) _____
Temp casing Yes Dia _____ From + _____ To _____

(7) PERFORATIONS/SCREENS
Perforations Method air perf
Screens Type _____ Material _____
Perf/ Casing/ Screen Dia From To Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size
Perf Casing 10 6 87 .25 1 1920

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
Temperature _____ °F Lab analysis Yes By _____
Water quality concerns? Yes (describe below) TDS amount 220 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County UMATILLA Twp 4.00 N N/S Range 27.00 E E/W WM
Sec 36 SE 1/4 of the NE 1/4 Tax Lot 1500
Tax Map Number _____ Lot _____
Lat _____ " or 45.78735400 DMS or DD
Long _____ " or -119.37327200 DMS or DD
 Street address of well Nearest address
77590 COL JORDAN RD, HERMISTON, OR 97838

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration _____
Completed Well _____
Flowing Artesian? Dry Hole?
WATER BEARING ZONES Depth water was first found _____
SWL Date From To Est Flow SWL(psi) + SWL(ft)

(11) WELL LOG Ground Elevation _____
Material From To
Existing well 0 185

Date Started 8/22/2019 Completed 8/22/2019
(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 _____ Date _____
Signed _____

(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 1766 Date 9/6/2019
Signed BRANDON BROWN (E-filed)
Contact Info (optional) brandon@waterwelldeveloping.com

