

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

UMAT
5924

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4N/37E/10ab

WATER RESOURCES DEPT.

(1) OWNER:

Name DARWIN K GRISWOLD Owner's Well Number: _____
Address 1403 Cottonwood
City Richland State WA Zip 99352

(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:

Depth of Completed Well 163 ft.

Special Standards date of approval NO

HOLE	SEAL	Amount
Diameter From To	Material From To	sacks or pounds
8 0 20	Gravel	20
8 20 39	Gravel	5
6 39 163		

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

☐ Other

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	1	39	200	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method NO
☐ 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	Pumping level	Drill stem at	Time 1/4 hr
40		163	1 hr

Temperature of water 54° 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 NO

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County UMATI Latitude _____ Longitude _____
Township 4 N or S, Range 37 E or W, WM.
Section 10 NW 1/4 NE 1/4
Tax Lot 600 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) RT#1 BOX 94
MILTON FREEDMAN, OR

(10) STATIC WATER LEVEL:

5 ft. below land surface. Date 10-29-93

Artesian pressure _____ lb. per square inch. Date _____

(11) WELL LOG:

Ground elevation _____

Material	From	To	WB?	SWL
Soil Gravel & Boulders	0	12		
Boulders	12	21		
Base of B&W	21	29		
Gravel	29	57		
Gravel	57	72		
Gravel	72	96		
Gravel	96	114		
Gravel	114	142		
Gravel & Fric	142	163		5

Date started 10-27-93 Completed 10-29-93

(unbonded) Water Well Constructor Certification:

I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed _____ Date _____

(bonded) Water Well Constructor Certification:

I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.

Signed Charles Summers Date 11-1-93

Company C&S SUMMERS WELL DRILLING Co. Job No. _____