

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

5
UMAT
6362

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MAY 26 1995

RECEIVED
JUN 21 1995
N/28E/28W

WATER RESOURCES DEPT. SALEM, OREGON
WATER (START CARD) # 40-67092
SALEM, OREGON

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

(1) OWNER: Well Number _____
Name C + B Feed Lot
Address P O Box 109
City Henrieville State ore 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 172 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
16	0	58	PTD Cem	58	0	75
12	58	184				

How was seal placed: Method A B C D E
 Other TRAME
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:	12	0	134	.25	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method PULL BACK
 Screens Type STAINLESS Material V-WIRE

From	To	Slot size	Number	Diameter	tele pipe size	Casing	Liner
132	172	.25		12"		<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Pump Bailer Air Flowing
 Artesian

Yield gal/min	Drawdown	Drill stem at	Time
300+		130	1 hr.

Temperature of water 56° 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 _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County umatilla Latitude _____ Longitude _____
Township 4N N or S Range 28E E or W. WM.
Section 28 SE 1/4 NW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
102 ft. below land surface. Date 5-3-95
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 70

From	To	Estimated Flow Rate	SWL
70	96	20	102
120	170	300+	102

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
SAND	0	15	
GRAVEL	15	18	
SAND	18	28	
GRAVEL	28	30	
SAND	30	44	
HARD SANDSTONE	44	68	
PEA GRAVEL	68	96	
BROWN SAND & CLAY	96	102	
BROWN CLAY + P. GRAVEL	102	108	
PEA GRAVEL	108	120	
BROWN CLAY	120	135	
GRAVEL	135	146	
BLUE CLAY + PEA GRAVEL	146	154	
GREEN + BLACK SANDSTONE	154	167	
"	167	170	
1/2" + LARGER GRAVEL	170	175	
BASALT	175	184	

Date started 3-3-95 Completed 5-3-95

(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 Jerry Burd WWC Number 544 Date 5-3-95

(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 Jerry Burd WWC Number 544 Date 5-3-95