

5

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

UMAT
6422

03N134E100

(START CARD) # 73856

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

(1) OWNER: Well Number _____

Name George Wells
Address 77138 Rothrock Rd.
City Adams State OR Zip 97810

(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 607 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
8"	0	515	N/A			
8"	515	607				

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:

Casing:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	N/A					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Liner:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____

Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<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
100+		607	1 hr.

Temperature of water 63° 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 3N N or S Range 34E E or W. WM. _____
Section 6 1/4 _____ 1/4 _____
Tax Lot 2803 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 77138 Rothrock Rd.
Adams, OR 97810

(10) STATIC WATER LEVEL:

52 ft. below land surface. Date 7-5-95
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 548

From	To	Estimated Flow Rate	SWL
548	573	100+	52

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Existing hole	0	515	
Gray basalt	515	548	
Black basalt	548	573	WB
Gray basalt	573	607	

Recondition procedure:
Hole was caving at 50 ft. Caving zone was cemented and redrilled.

RECEIVED

SEP 12 1995

WATER RESOURCES DEPT.
SALEM, OREGON

Date started 6-15-95 Completed 7-5-95

(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.

WWC Number _____
Signed _____ Date _____

(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.

WWC Number 1218
Signed Patrick Wallace Date 7-15-95