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STATE ENGINEER
SALEM, OREGON

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OCT 17 1956

WATER WELL DRILLERS REPORT
STATE OF OREGON **G-402**

Do Not State Well No. 1/32-17K(1)
Fill In State Permit No. _____

UMAT
89

(1) OWNER: **STATE ENGINEER**
Name **TOWN OF PILOT ROCK**
Address **Pilot Rock, Oregon**
Arthur

(2) LOCATION OF WELL: **Box G402**
County **Umatilla** Owner's number, if any— **2**
R. F. D. or Street No. _____
Bearing and distance from section or subdivision corner
N 11°13' 35" W a distance of 3,155.85 feet
from the NE corner of Section 20, Township
1 S, Range 32 EWM

(3) TYPE OF WORK (check):
New well Deepening Reconditioning Abandon
abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):
Domestic Industrial Municipal
Irrigation Test Well Other

(5) EQUIPMENT:
Rotary
Cable
Dug Well

CASING INSTALLED:
Soldered Welded

FROM	ft. to	ft.	Diam.	Gage or Wall	Diameter of Bore	from ft.	to ft.
"	0	26	6"	"	16" 3/8	"	"
"	0	101	6"	"	12" 3/8	"	"

Type and size of shoe or well ring _____
Describe joint _____

(7) PERFORATIONS:
Type of perforator used **none**

SIZE of perforations	in., length, by	in.		
FROM	ft. to	ft.	perf per foot	No. of rows
"	"	"	" " "	" " "
"	"	"	" " "	" " "
"	"	"	" " "	" " "

SCREENS:
Give Manufacturer's Name, Model No. and Size
none

(8) CONSTRUCTION:
Was a surface sanitary seal provided? Yes No To what depth **101** ft.
Were any strata sealed against pollution? Yes No
If yes, note depth of strata **0-101'**
FROM _____ ft. to _____ ft.
METHOD OF SEALING **Cement**

(9) WATER LEVELS:
Depth at which water was first found **232'-235** ft.
Standing level before perforating _____ ft.
Standing level after perforating _____ ft.
Log Accepted by: _____
[Signed] *D. K. Smith* Dated **8/30** 19**56**
Mayor, Town of Pilot Rock

(10) WELL TESTS: **OBSERVATION WELL**
Was a pump test made? Yes No If yes, by whom? **Driller**
Yield: **450** gal./min. with **193** ft. draw down after **4** hrs.
" " " "
" " " "
Artesian flow **10** g.p.m.
Shut-in pressure _____ lbs. per square inch.
Bailer test _____ g.p.m. with _____ ft. drawdown
Temperature of water **64** Was a chemical analysis made? Yes No
Was electric log made of well? Yes No

(11) WELL LOG:

Diameter of well,	12	inches.
Total depth	486	ft. Depth of completed well 486 ft.
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.		
0 ft. to	4 ft.	Brown soil
4 "	9 "	Broken rock & brown clay
9 "	15 "	Cement gravel
15 "	17 "	Broken rock covey
17 "	25 "	Cement gravel
25 "	26 "	Broken basalt, hard grey
26 "	35 "	Grey basalt
35 "	45 "	Broken basalt
45 "	50 "	Broken black basalt
50 "	51 "	Hard basalt
51 "	55 "	Brown basalt
55 "	60 "	Grey basalt
60 "	62 "	Black basalt
62 "	77 "	Grey basalt
77 "	80 "	Brown basalt
80 "	112 "	Grey basalt
112 "	132 "	Red rock
132 "	142 "	Broken brown basalt
142 "	232 "	Black basalt
232 "	235 "	Broken brown basalt (water bearing)
235 "	272 "	Grey basalt
272 "	299 "	Broken brown basalt (water bearing)
299 "	347 "	Grey basalt
347 "	352 "	Broken brown basalt
352 "	377 "	Brown basalt
377 "	430 "	Black basalt
430 "	460 "	Broken brown basalt (water bearing)
460 "	462 "	Grey basalt
462 "	486 "	Brown basalt (water bearing)
Ground elevation at well site 166 feet above mean sea level.		
Work started 12/12/55 19 , Completed 3/5/56 19		

Well Driller's Statement:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
NAME **D. K. Smith**
(Person, firm, or corporation) (Typed or printed)
Address **1013 N. Clinton, Walla Walla, Washington**
Driller's well number _____
[Signed] *D. K. Smith*
(Well Driller)
License No. _____ Dated **8/10/56**, 19_____



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301
 (503) 986-0900
 www.oregon.gov/owrd

Application for Well ID Number

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Do not complete if the well already has a Well Identification Number.

JAN 27 2026

OWRD

I. OWNER INFORMATION

Current Owner Name (please print): City of Pilot Rock c/o Teri Bacus

Mailing Address: 144 N. Alder Place

City, State, Zip: Pilot Rock, OR, 97868

Mail Well ID to: SAME AS ABOVE In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 10 S (North / South) Range: 32 E (East / West) Section: 17 NW 1/4 of the SE 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 1100 County Umatilla

GPS Coordinates: 45.478343°, -118.840927°

Street Address of Well, City: 547 Delwood St

If the property had a different street address in the past: NA

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Municipal

Date Well Constructed (or property built): 3-5-1956 Total Well Depth: 486' Casing Diameter: 12" + 1/6"

Owner at time the well was constructed (if known): City of Pilot Rock Well Report # (if known): UMAT 89

Other Information: _____

SUBMITTED BY (please print): PAUL GARVIN

PHONE: 503-347-7188 EMAIL &/or FAX: GARVIN.HYDROGEO@GMAIL.COM

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
 Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

1-27-2026

Well Report Number:

UMAT 89

Well Identification #:

L-160014