WATER WELL REPORT STATE OF OREGON

RECEIVED WAS State Well No.

State Permit No.

OCT
PLEASE TYPE O 3 1984

OREGON.	V				
	N OF WELL				
County Usion		Driller's wel	4:1	~-	
NW4 NW		T. 25		8E	W.N
Tax Lot #	Lot	Blk		ubdivision	
Address at well location			ver Sx	132 c	280 280
COUTH CONT	er Live C	. Kd a	68	<u> </u>) [()
(11) WATER L	EVEL: Con	ipleted w	ell.	1	WE
Depth at which water w	as first found	26'			í
Static level /	1	ft. below l	and surfa	ce. Date	9-19
Artesian pressure				inch. Date	
(12) WELL LO	7. 5.			12	
,	60	of well below	_		160
Pormation: Describe co		ft. Depth of			ond sho
hickness and nature of					
or each change of form	nation. Report ea	ch change in			
and indicate principal v	vacer-bearing sur	1ua.			
N	IATERIAL		From	То	SWL
Top Soil			0	4	
BURNUN C	LAU (SA	ndu)	u	36	
Brown Ch	nly # Gr	nveL	36	42	
Brown CL	nie		42	51	
Comerted	Grave	L	57	84	14.
Clay Saul	1d Grave	1	44	100	14
Contented	Cravel		100	135	14
Clara Rus	1401	2	131-	1/1	111
· · · · · · · · · · · · · · · · · · ·					
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1		1		٠	
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			†		
Work started 9-7	19 8	4 Complete	- O	17	19 8
WOLK Started /-			0 -1	9	198
Dete well drilling mach	ine moved att at w				
			7 7		
(unbonded) Water	Well Constru	ctor Certifi			
(unbonded) Water This well was co	Well Constru	ctor Certif	upervisi	on. Mate	rials use
(unbonded) Water This well was co and information rep	Well Constru	ctor Certifier my direct s	supervisi sest knov	on. Mate wledge ar	rials use ad belief
(unbonded) Water This well was cound information reported [Signed]	Well Constructed under the above are	ctor Certifier my direct s	supervisi est knov Date	on. Mate	rials use nd belief
(unbonded) Water This well was cound information reported [Signed]	Well Constructed under the above are	ctor Certifier my direct s	supervisi est knov Date	on. Mate wledge ar	rials use nd belief
(unbonded) Water This well was cound information reported [Signed]	Well Constructed under the above are	ctor Certifier my direct s	supervisi est knov Date	on. Mate wledge ar	rials use nd belief
This well was contained information report [Signed]	Well Constructed under the above are labored above are labored by:	ctor Certifier my direct strate to my b	supervisions known between Company	on. Mate wledge an 7-27 y Name	rials use nd belief , 19 84
(unbonded) Water This well was condinformation reported in the second of	Well Constructed under the data above are left. If Constructor 1773 issued by:	ctor Certification of the control of	supervisions known between Company	on. Mate wledge an 7-27 y Name	rials use nd belief , 19 84
Bonded Water We Bond 76 - 0130 - 12	Well Constructed under the above are larger than the larger th	ctor Certification of the complete comp	oest known Date Date Date Con:	on. Mate wledge an 7-27 y Name	rials use nd belief , 19 84 is true t
(unbonded) Water This well was or and information report [Signed]	Well Constructed under the data above are left of the	Certification ief.	supervisions known. Date	on. Mate wledge an 7-27 y Name	rials use nd belief , 19 84
(unbonded) Water This well was or and information report [Signed]	Well Constructed under the above are larger than the larger th	ctor Certification of the complete comp	supervisions known. Date	on. Mate wledge an 7-27 y Name	rials use nd belief , 19 84 is true t
(unbonded) Water This well was of and information rep [Signed]	Well Constructed under the data above are left of the	Certification ief.	supervisions known. Date	on. Mate wledge an 7-27 y Name	rials use nd belief , 19 84 is true t
(unbonded) Water This well was or and information rep [Signed]	Well Constructed under the data above are left of the	Certification ief.	supervisions through the state of the state	on. Mate wledge an 7-27 y Name	rials use nd belief , 19 84 is true t

(1) OWNER:
Name Steve PONNELL
Address Ry 180X 1237
City La Grande State Ove
(2) TYPE OF WORK (check):
New Well Deepening □ Reconditioning □ Abandon □
If abandonment, describe material and procedure in Item 12.
(3) TYPE OF WELL: (4) PROPOSED USE (check):
Rotary Air Driven Domestic Industrial Municipal Rotary Mud Dug Irrigation Test Well Other Domestic Withdrawal Reinjection
) CASING INSTALLED: Steel Plastic Welded Welded
LINER INSTALLED:
"Diam. from Not t. to ft. Gauge
(6) PERFORATIONS: Perforated? Yes \(\sigma \) No Type of perforator used \(\sigma \) Yes
Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
(7) SCREENS: Well screen installed? Yes You
Manufacturer's Name
Type Model No.
Diam. Slot Size Set from ft. to ft.
Diam. Slot Size Set from ft. to ft.
Was a pump test made? ☐ Yes No If yes, by whom?
d: gal/min. with ft. drawdown after hrs.
" " "
Air test gal./min. with drill stem at ft. hrs.
Bailer test 48 gal./min. with /6 ft. drawdown after 1 hrs.
† +esian flow g.p.m.
perature of water 5 9 Depth artesian flow encountered ft.
(9) CONSTRUCTION: Special standards: Yes \(\text{No } \text{D} \)
Well seal—Material used Comeat SLANYY
Well sealed from land surface to
Diameter of well bore to bottom of seal
Number of sacks of cement used in well seal
How was cement grout placed? Pump to from
Was pump installed? Type
Was a drive shoe used?
Did any strata contain unusable water?
Type of Water? depth of strata Method of sealing strata off
Was well gravel packed? ☐ Yes ♠No Size of gravel:
Gravel placed from

For Official Use Only:
Received Date: County Well Log ID # Well Identification Tag # Well Identification Tag # Well Identification Tag #
DECEIVED
NOV 2 5 2004 WELL IDENTIFICATION APPLICATION FORM (please see attached instructions) WELL IDENTIFICATION APPLICATION FORM (please see attached instructions) State Wull + 25/38E 3286 BUYER/CURRENT WELL OWNER:
2 Shappy M55
Name: TROY STIERY Conyon Rd. Mailing Address: 62455 OWSley Conyon Rd.
Mailing Address: 62455 Owself Congress of the state of th
γ
City: State: Lip
WELL LOCATION:
WELL LOCATION: County: Well # (designation owner has given to well if multiple wells exist on same property): Township: North or South, Range: 38 East or West, Section: 32 1/4 1/4 Tax Lot #: 904 (not tax acct.#") Type of Well: water supply monitoring Tax Lot #: 5593
Nest or South Range: 38 (East or West, Section: 32
Tay Lot #: 904(not tax acct.#") Type of Well: water supply monitoring
Rig# 5593
Address of Well: 6245 (Street) (City)
Does this well have a formal water right associated with it? Yes: No: No: (If unknown you may contact the Water Rights Information Group at 503-378-3739 extension 201)
If Ves: Application #: Permit #:Centification #:
(Ontional): Latitude Longitude (May sometimes be obtained from Well Log Report)
a till is well report. If report is not available please complete
the following at a minimum the prior language names some plants
Prior landowners can be obtained from the County Assessor.) Prior landowners can be obtained from the County Assessor.)
Start Card #: Approx. Well Consultation Cons
Prior landowners can be obtained from the County Assessor.) Start Card #: Well Constructor: Stoffel, Robert Stoffel Brothers Dulling Co.
Name of Land Owner at Time of Construction (or use of prior taxas and prior ta
Steve Donnell
Well Depth (in feet): 160 Static Water Level (in feet): 14.
Diameter of Exposed Well Casing (in inches):
Please Return Completed Form to: Well ID Program @ Oregon Water Resources Department 158 12th Street NE - Salem, OR 97301-4172, or fax to 503-378-8130
PREVIOUS WELL ID APPLICATION VERSIONS SHOULD NOT BE USED REVISED: 5-9-02