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AUG 13 1999

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

WATER RESOURCES DEPT.  
SALEM, OREGON

WELL I.D. # L 27113  
START CARD # 121597

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

(1) OWNER: Well Number \_\_\_\_\_

Name RONALD LARVIK  
Address 1202 Willow St  
City LA GRANDE State OR Zip 97850

(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 285 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12	0	22	Cement	13	20	10 SACKS
			Bentonite	0	13	18 SACKS
8	22	283				

How was seal placed: Method  A  B  C  D  E  
 Other Poured Bentonite  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to NONE ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 8	13	277	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	<u>NONE</u>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 8" 277

(7) PERFORATIONS/SCREENS:

Perforations Method Air Knife  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
160	260	3/32	700	8"		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
<u>200</u>		<u>270</u>	<u>2</u> hr.
<u>Estimate</u>	<u>400 GPM</u>		

Temperature of water 53° Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  No  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 Union Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 35 N or S Range 38E E or W. WM.  
Section 16 NE 1/4 NE 1/4  
Tax Lot 120 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) 3412 Highway  
30 LA GRANDE OR 97850

(10) STATIC WATER LEVEL:  
53 ft. below land surface. Date 8-6-99  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 10'

From	To	Estimated Flow Rate	SWL
160	180	100 <sup>T</sup>	53
190	225	100 <sup>T</sup>	53
230	280	100 <sup>T</sup>	53

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Brown Clay	0	10	
Brown Clay w/Gravel	10	135	
Brown Clay	135	140	
Brown Clay Sand & Gravel	140	180	
Brown Clay	180	190	
Brown Clay & Gravel	190	225	
Brown Clay	225	230	
Brown Clay & Gravel	230	283	53°

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SALEM, OREGON

Date started 8-8-99 Completed 8-6-99

(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 415  
Signed Robert J. Stoff Date 8-10-99