

Wall 50886

STATE OF OREGON
WATER SUPPLY WELL REPORT

WELL I.D. # L 54980
START CARD # 146103

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

(1) LAND OWNER Well Number 1
Name City of Jostine
Address City Hall
City Jostine State OR Zip 97857

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

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
16	0	170	CEMENT	0	170	250 SKS
10	170	260				

How was seal placed: Method A B C D E
 Other Cementing Shoe Pump around
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	+3	170	375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	8	142	164	365	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	8	214	224	365	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 170 Cementing shoe

(7) PERFORATIONS/SCREENS:

Perforations Method Johnson
 Screens Type 304 Material Stainless

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
164	214	120		8"	8"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
230	1.02		4 HRS

Temperature of water 41 Depth Artesian Flow Found _____
Was a water analysis done? Yes No
Did any strata contain water not suitable for use? Yes No Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Wallowa Latitude _____ Longitude _____
Township 1 N or S Range 45 E or W. WM.
Section 22 NW 1/4 NE 1/4
Tax Lot None Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) INTAKE JOSTINE RIVER ROAD

(10) STATIC WATER LEVEL:
10' ft. below land surface. Date Sept 4, 2007
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 28'

From	To	Estimated Flow Rate	SWL
28	50	40 G.P.M.	6
174	177	25 G.P.M.	10
200	214	200+	10

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Silty Clay + Cobbles	0	28	
Cobbles w/ little clay	28	38	6
Cobbles w/ more BR clay	38	48	
Small Gravel w/ clay	48	50	
Boulders BR clay	50	72	
Gravel + BR clay	72	114	
Boulders BR clay	114	174	10
Loose Sand + Gravel	174	177	
BR clay + Gravel	177	200	
Cemented Gravel (water)	200	214	10
BR clay + Gravel	214	220	
Tight cemented Gravel	220	260	

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OCT 12 2007

WATER RESOURCES DEPT
SALEM, OREGON

Date started Aug 14, 2007 Completed Oct 2, 2007

(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 Jody Hays WWC Number 1669 Date Oct 8, 2007

(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 Jody Hays WWC Number 1669 Date Oct 8, 2007

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DEC 07 2007