

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

DEC -7 1987
 WATER RESOURCES DEPT.
 SALEM, OREGON

WALL
 542

35/45 E-29ac

(1) OWNER: Owner's Well Number: _____
 Name Wallowa Lake County Service Dist
 Address P.O. Box E
 City Enterprise State OR Zip 97828

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Depth of Completed Well 91' ft.
 Special Standards date of approval _____

HOLE		SEAL		Amount sacks or pounds
Diameter	Depth	Material	Depth	
8"	25'	Cement	35'	38 SACKS

How was seal placed? Method A B C D E
 Other _____
 Backfill placed from 12MB ft. Material 91'
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
8"	25'	60'	322	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7"	55'	60'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
7"	80'	90'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Liner: _____

Location of shoe(s) 8" 60'

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type Johnson Material Stainless Steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
60'	80'	.90		7"	1"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Pumping level	Drill stem at	Time 1/2 hr
60	33'		1 hr
120	34'		8 hrs

Temperature of water 43 Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom Anderson & Perry
 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 Wallowa Latitude _____ Longitude _____
 Township 35 N or S, Range 45 E or W, WM.
 Section 29 SW 1/4 NE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 4,625 ft S 1,595'
W. from NE Corner of Sec 29 T35 R45E

(10) STATIC WATER LEVEL:
33 ft. below land surface. Date 11-30-87
 Artesian pressure _____ lb. per square inch. Date _____

(11) WELL LOG: Ground elevation _____

Material	From	To	WB?	SWL
Top Soil	0	2		
Large Boulders & Clay Grey	2	20		
Boulders & Clay Brown	20	52		
Sand & Gravel	52	81	yes	35'
Granite (Discomposed)	81	91	no	35'

Date started 10-23-87 Completed 11-30-87

(unbonded) Water Well Constructor Certification:
 I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed _____ Date _____

(bonded) Water Well Constructor Certification:
 I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.
 Signed Robert V. Stoffel Date 11-30-87
 Company Stoffel Bros Drilling Co Co. Job No. _____

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See WALL 542 NOV 17 1989

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3S/45E/29QC

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HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
12"	0' 35'	Cement	35'	38 SACKS
8"	25' 41'			

How was seal placed? Method A B C D E
 Other _____
 Backfill placed from NAME ft. Material 91'
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) **CASING/LINER:**

Casing:	Diameter	From	To	Gauge	Steel		Plastic		Welded		Threaded	
					✓	□	✓	□	□	□		
	8"	25'	60'	332	✓	□	✓	□	□	□	□	□
	7"	55'	60'	250	✓	□	✓	□	□	□	□	□
	7"	80'	90'	250	✓	□	✓	□	□	□	□	□

Liner: _____
 Final location of shoe(s) 8" 60'

(7) **PERFORATIONS/SCREENS:**

Perforations Method _____
 Screens Type JOHNSON Material Stainless Steel

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
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