

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

WASC
003672
START CARD NO. 0320 MAY 15 1989

RECEIVED 4/21/89/31 db

(1) OWNER: Well Number:
Name Ver1 Fleischman
Address Rt 1, Box 42
City Maupin State OR Zip 97037

(2) TYPE OF WORK: Clean-out
 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:
Special Construction approval Yes No Depth of Completed Well 624 ft.
Explosives used Yes No

HOLE SEAL Amount
Diameter From To Material From To sacks or pounds
6" 543 624

How was seal placed: Method A B C D E
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: _____
Liner: _____
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min Drawdown Drill stem at Time
same water 95 GPM 60 ft 24 hr

Temperature of water 60° Depth Artesian Flow Found _____
Was a water analysis done? 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 WASC Date DEPT.
Township SALES, OREGON 14 E Longitude _____
Section 31 NW SE ¼
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Rt 1, Box 42
Maupin, Oregon 97037

(10) STATIC WATER LEVEL:
300 ft. below land surface. Date 4-19-89
Artesian pressure _____ lb. per square inch. Date _____

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

From	To	Estimated Flow Rate	SWL

(12) WELL LOG: Ground elevation 1800

Material	From	To	SWL
Brown sandstone	543	578	300
Rocky brown sandstone	578	593	300
Brown, sandstone	593	624	300
Clay had filled well to 400 ft.			

Date started April 18, 1989 Completed April 19, 1989

(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 well construction standards. Materials used and information reported above are true to my best 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed Gilbert Clayton WWC Number 569
Date 5-11-89