

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

Morr
51237

WELL I.D. # L 64839
 START CARD # 158627

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

(1) LAND OWNER R.D. OFFUT Co. Well Number _____
 Name _____
 Address 75906 Threemile rd
 City Boardman State OR Zip 97818

(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 980
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks of pounds
Diameter	From	To	Material	From	To	
20	0	71	Cement	0	71	15 1/2 yds
16	71	495	Cement	0	495	22 1/2 yds
12	495	980				

How was seal placed: Method A B C D E
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Casing:	Diameter	From	To	Gauge	Steel				Plastic	Welded	Threaded
					Steel	Plastic	Welded	Threaded			
	16	0	71	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	12	0	495	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 495

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Material	
						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"/>

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

Yield gal/min	Drawdown	Drill stem at	Time	Flowing
				Artesian
1200		980	1 hr.	<input checked="" type="checkbox"/>
				<input type="checkbox"/>

Temperature of water 72° Depth Artesian Flow Found _____
 Was a water analysis done? Yes By whom RECEIVED
 Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____ AUG 06 2004

(9) LOCATION OF WELL by legal description:
 County Morrow Latitude _____ Longitude _____
 Township 3 N N or S Range 23 E E or W. WM.
 Section 27 NW 1/4 SE 1/4
 Tax Lot 100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) SAME

(10) STATIC WATER LEVEL:
427 ft. below land surface. Date 7-1-04
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 22

From	To	Estimated Flow Rate	SWL
22	63	30	22
160	170	150	29
560	600	350	427
828	835	100	427
925	940	1200	427

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Silt	0	45	22
Caliche	45	63	
Brown Basalt	63	105	
Tan Clay	105	144	
Blue Clay	144	160	
Black visicular	160	170	29
Grey Basalt	170	278	
Black visicular	278	303	
Blue Clay	303	425	
Black Basalt	425	475	
Grey Basalt	475	560	427
Black visicular	560	600	
Black Basalt	600	635	
Grey Basalt	635	748	
Black Basalt	748	828	
visicular Basalt	828	835	
Grey Basalt	835	925	
visicular Basalt	925	940	
Black Basalt	940	980	

Date started 5-2-04 Completed 7-4-04

(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 1766
 Signed [Signature] Date 7-30-04