FOR OFFICE USE ONLY

PERMIT #_____

WELL ID_____

DATE RECIEVED_____

CONFEDERATED TRIBES OF THE UMATILLA RESERVATION
DEPARTMENT OF NATURAL RESOURCES
WATER RESOURCES PROGRAM, 46411 Timine Way Pendleton, OR. 97801
(541) 429-7291

WELL DRILLER'S REPORT

1. Well Owner

Name:_____

Address:_____

City/State:_____

2. Type of Work

New Well ☐ Deepening ☐ Abandonment ☐

Reconditioning ☐

Other_____

3. Well Drilling Method

Rotary ☐ Air ☐ Cable ☐ Hydraulic ☐

Dug ☐ Reverse Rotary ☐ Other ☐

4. Proposed Beneficial Use of Water

Domestic ☐ Irrigation ☐ Municipal ☐ Stock ☐

Industrial ☐ Other ☐

5. Well Construction

Date Started _____ **Completed**_____

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amt	Sacks/lbs
					Calculated		
					Calculated		
					Calculated		

Method of Applying cement grout_____

Method of Well Disinfection:

Material Used _____ Amount_____

Abandonment Using Unhydrated Bentonite

Proposed Amount _____ Actual Amount_____

Casing Schedule: Steel ☐ Plastic ☐

Welded ☐ Threaded ☐

Casing Gauge or Thickness_____

Casing Diameter:_____in. from_____ ft. to_____ ft.

_____in. from_____ ft. to_____ ft.

Liner installed:_____in. dia. from_____ft. to_____ ft.

Liner Gauge_____

Perforated: Yes ☐ No ☐

Type of Perforator used_____

Size of Perforations_____in. by_____in.

From_____ ft. to_____ft.

Well Screen Installed: Yes ☐ No ☐

Manufactured by:_____

Type_____ Model#_____

Diameter_____in. Slot size_____ by

_____ Set From _____ ft. to _____ ft.

6. Location of Well (legal description)

_____¼ of the _____¼ of the _____¼ of

Section_____ T_____ , R_____ , W.M.

Tax Lot #_____ Allotment#_____

Lat_____ °_____ '_____ " or_____DMS or DD Long_____ °

_____ '_____ " or_____ DMS or DD

7. Well Test Data

Drawdown is amount water level is lowered below static level.

Was a pump test made? Yes ☐ No ☐ If Yes, by whom?

Yield_____ GPM with_____ ft. drawdown after _____hrs.

Air Test:_____ GPM with drill stem at_____ ft. for_____ hrs.

Bailer_____ GPM with_____ ft. drawdown after_____ hrs.

8. Water Level

Static Water Level_____ feet below ☐ above ☐ land surface.

Flowing? ☐ Yes ☐ No G.P.M Flow_____

Artesian closed in pressure_____ psi

Controlled by Valve ☐ Cap ☐ Plug ☐ Temperature_____☐°F☐°C

9. Lithologic Log/Well Log

Describe Nature and thickness of materials at each change of formation and aquifer penetration. Report each change in position of Static Water Level (SWL) and indicate water bearing strata.

Material Description	From	To	Water Bearing	SWL

10. Licensed and Bonded Well Driller Certification

I/We certify that minimum well construction standards were complied with at the time of drilling and that the information contained in this log is true and accurate.

Firm Name_____

License Number_____

Address_____

Signed By(FirmOfficial)_____

Date_____

Operator_____

License#_____ Date_____

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES PROGRAM WITHIN 15 DAYS OF COMPLETION OF WORK

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