

STATE ENGINEER
Salem, Oregon

WASCO
003323

OBSERVATION WELL
Well Record

Well #2

STATE WELL NO. 2N/13-32J(4)
COUNTY Wasco
APPLICATION NO. U-203
PERMIT U-184

OWNER: Chenoweth Irrigation Coop. Inc.

MAILING ADDRESS:

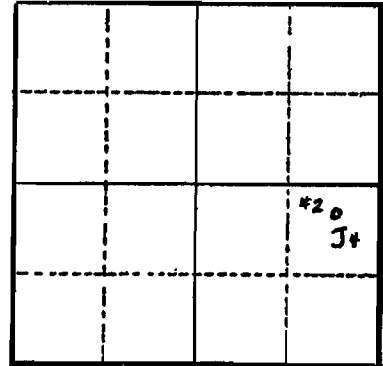
LOCATION OF WELL: Owner's No. 2

CITY AND STATE:

The Dalles

NE 1/4 SE 1/4 Sec. 32 T. 2 N. R. 13 E. W.M.

Bearing and distance from section or subdivision corner



Section 32

Altitude at well

TYPE OF WELL: drilled Date Constructed 1949

Depth drilled 260 Depth cased 21 1/2

CASING RECORD:

10-inch hole to 175 ft, 8-inch hole to 260 ft.

10 INCH FROM 0 TO 21 1/2 FEET

FINISH:

open hole

AQUIFERS:

Basalt, 231 to 241 ft.

WATER LEVEL:

86' below land surface

PUMPING EQUIPMENT: Type Cook H.P.
Capacity 300 G.P.M.

WELL TESTS:

Drawdown 1 ft. after hours 700 G.P.M.

Drawdown ft. after hours G.P.M.

USE OF WATER public supply Temp. °F. 19

SOURCE OF INFORMATION U-203 - GR-4111

DRILLER or DIGGER Dorin Wilburn

ADDITIONAL DATA:

Log Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

RECEIVED

MAY 21 2009

WATER RESOURCES DEPT
SALEM, OREGON

T 10885

WBL #2

STATE ENGINEER
Salem, Oregon

State Well No. 2N/13-32J(4)
County Wasco
Application No. U-203

Well Log

Owner: Chenowith Irrigation Coop. Inc Owner's No. 2

Driller: Dorin Wilburn Date Drilled _____

CHARACTER OF MATERIAL	(Feet below land surface)		Thickness (feet)
	From	To	
Sand, gravel, some water	0	9½	9½
Rock, broken	9½	12	2½
Basalt, gray, hard	12	36	24
Basalt, brown, hard	36	44	8
Basalt, gray hard	44	50	6
Clay, blue, black rock, water crystals(quartz) seep of water	50	69	19
Basalt, gray	69	81	12
Basalt, gray, hard	81	89	8
Basalt, black, blue clay & water crystals(quartz)	89	110	21
Clay, blue, and black basalt	110	126	16
Basalt, black	126	169	43
Basalt, black, hard	169	174	5
Basalt, gray, hard, at 210 ft, water level dropped from 55 to 87½ ft from surface	174	229	55
Basalt, black, hard	229	231	2
Basalt, black and red, porous honeycombed, water bearing	231	241	10
Basalt, black	241	249	8
Basalt, gray, hard	249	260	11

RECEIVED
MAY 21 2009

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

WELL I.D. # L 81105

START CARD # 181847

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

(1) LAND OWNER Chenoweth Water PUD Well Number _____
Name Chenoweth Water PUD
Address PO Box 870
City The Dalles State OR Zip 97058

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other Crane Truck

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 260 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
			See #12			

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 _____

Casing:	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
	8"	+2	128	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 8x10" Hook wall packer @ 128-131'

(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"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time

Temperature of water _____ 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 (legal description)
County Wasco
Tax Lot 1200 Lot _____
Township 2N N or S Range 13E E or W WM
Section 32 DA SE 1/4 NE 1/4
Lat _____ or _____ (degrees or decimal)
Long _____ or _____ (degrees or decimal)
Street Address of Well (or nearest address) 2312 West 8th Street
The Dalles, OR

(10) STATIC WATER LEVEL
120 ft. below land surface. Date 11/17/2005
120 ft. below land surface. Date 11/18/2005
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 _____

Material	From	To	SWL
Existing 10" well drilled in 1949 Chenoweth Irrigation Coop. Inc. recorded depth @ 260 ft. (Well not accessible to drill rig) 8" steel liner casing installed in 10" bore hole w/8x10 hook wall packer set @ 128-131 ft. Pressure grout annular to surface with 41 sks. cement grout mix.			120'
			120'

RECEIVED
NOV 23 2005
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 11/18/2005 Completed 11/18/2005

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, 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 _____ Date _____
Signed _____

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, 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 573 Date 11/21/2005
Signed _____

RECEIVED

MAY 21 2009

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

11-08-2007

WELL LABEL # L 3325 81105

START CARD # 1002501

(1) LAND OWNER
Owner Well I.D.
First Name Last Name
Company CHENOWITH WATER PUD
Address 2312 WEST 8TH STREET
City THE DALLES State OR Zip 97058-0870

(2) TYPE OF WORK
New Well Deepening Conversion
Alteration (repair/recondition) Abandonment

(3) DRILL METHOD
Rotary Air Rotary Mud Cable Auger Cable Mud
Reverse Rotary Other Pump truck for pipe

(4) PROPOSED USE
Domestic Irrigation Community
Industrial/ Commercial Livestock Dewatering
Thermal Injection Other decommissioned

(5) BORE HOLE CONSTRUCTION
Special Standard Attach copy
Depth of Completed Well 0.00 ft.

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, sacks/lbs

How was seal placed: Method A B C D E

Other see comments

Backfill placed from ft. to ft. Material

Filter pack from ft. to ft. Material Size

Explosives used: Yes Type Amount

(6) CASING/LINER
Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd

Shoe Inside Outside Other Location of shoe(s)

Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type Material

Table with columns: Per/S, Casing/Screen, Liner, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size

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

Pump Bailer Air Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr)

Temperature F Lab analysis Yes By

Water quality concerns? Yes (describe below)

Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)
County Wasco Twp 2.00 N N/S Range 13.00 E E/W WM
Sec 32 NE 1/4 of the SE 1/4 Tax Lot 1900
Tax Map Number Lot
Lat 0 0 " or DMS or DD
Long 0 0 " or DMS or DD
Street address of well Nearest address
2312 WEST 8TH STREET
THE DALLES, OR 97058-0870

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Predeepening
Completed Well
Flowing Artesian? Dry Hole?

WATER BEARING ZONES
Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft)

(11) WELL LOG
Table with columns: Material, From, To, Ground Elevation

RECEIVED
MAY 21 2009

WATER RESOURCES DEPT
SALEM, OREGON

Date Started 10-31-2007 Completed 11-01-2007

(unbonded) Water Well Constructor Certification
I certify that the work I performed on the construction, deepening, 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.

License Number Date
Electronically Filed
Signed

(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, 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.

License Number 1293 Date 11-08-2007
Electronically Filed
Signed JIM JHANSEN (E-filed)
Contact Info (optional)

T 10035

WEL#3

ORIGINAL
File Original, and
Duplicate with the
STATE ENGINEER,
SALEM, OREGON

RECEIVED
JUN 14 1956

WATER WELL DRILLERS REPORT

Do Not State Well No. 2413-32 A (1)
Fill In App State Permit No. C-33

STATE OF OREGON

OBSERVATION WELL

(1) OWNER: STATE ENGINEER
Name Chenoweth Irrigation Cooperative
SALEM, OREGON
Address The Dalles, Oregon

WASCO
003314

(2) LOCATION OF WELL:

County Wasco Owner's number, if any 3
R. F. D. or Street No. NE 1/4 Sec 32 T 2N R 12E
Bearing and distance from section or subdivision corner
274'S 975'W - NE Corner Section
32 T 2N R 12E
Lot 4, Tract 14, Ship's News

(3) TYPE OF WORK (check):

Drill well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) EQUIPMENT:

Rotary
Cable
Dug Well

CASING INSTALLED:

FROM	ft. to	ft.	Material	Gage or Wall
	52	16	lam. 3/8	
	167	190	16	3/8
			(liner)	

If gravel packed

Diameter of Bore	from ft.	to ft.

Type and size of shoe or well ring

Describe joint

(7) PERFORATIONS:

Type of perforator used none

FROM	ft. to	ft.	in. length, by	in.
			perf per foot	No. of rows

SCREENS:

Give Manufacturer's Name, Model No. and Size

CONSTRUCTION:

Was a surface sanitary seal provided? Yes No To what depth 52 ft.

Were any strata sealed against pollution? Yes No

If yes, note depth of strata

FROM surface ft. to 23 ft.

METHOD OF SEALING cement grout placed around 16" pipe

(9) WATER LEVELS:

Depth at which water was first found 256 ft.

Standing level before perforating not perf. ft.

Standing level after perforating 76 ft.

Log Accepted by: CHENOWETH IRRIGATION COOPERATIVE INC.

[Signed] By Leo W. Smith V.P. Owner Dated June 13, 1956

(10) WELL TESTS: R. J. Strasser Drilling Co.

Was a pump test made? Yes No If yes, by whom? Co.

Yield: 1200 gal./min. with 2 ft. draw down after 8 hrs.

Artesian flow g.p.m.

Shut-in pressure lbs. per square inch.

Baller test g.p.m. with ft. drawdown

Temperature of water Was a chemical analysis made? Yes No

Was electric log made of well? Yes No

(11) WELL LOG: 16

Diameter of well, inches.

Total depth 275 ft. Depth of completed well 275 ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

Surf. to	ft.	Material
	1	Topsoil
	1	19 Broken rock with clay
	19	28 Black medium hard rock
	28	71 Hard grey basalt
	71	97 Medium hard black basalt
	97	129 Hard grey basalt
	129	153 Medium hard grey basalt
	153	169 Hard grey basalt
	169	183 Blue green clay - some rock
	183	189 Brown soft rock
	189	256 Hard grey rock
	256	262 Brown porous rock(water)
	262	269 Grey and brown rock(water)
	269	274 Medium hard grey basalt
	274	275 Hard grey basalt

RECEIVED

MAY 21 2009

WATER RESOURCES DEPT
SALEM, OREGON

Ground elevation at well site feet above mean sea level.

Work started 19 Completed May 1 1956

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME R. J. Strasser Drilling Co.
(Person, firm, or corporation) (Typed or printed)

Address 8110 SE Sunset Lane Portland 6

Driller's well number 3076

[Signed] R. J. Strasser (Well Driller) Dated May 22 56

License No. Dated, 19.....

STATE OF OREGON
WATER SUPPLY WELL REPORT
 (as required by ORS 537.785)

WATER RESOURCES DEPT.
 SALEM, OREGON

WASC
 50457

WELL ID # L14032
 (START CARD) # 095973

(1) OWNER:

Well Number: 1-B

Name Chenoweth Irrigation Co-op
 Address 2312 W 8th St.
 City The Dalles, State OR Zip 97058

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

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	secks or pounds	Bags
18"	0 194	Cement	0 165		250
12"	194 220				
10"	220 242				

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	+1.5	165	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 165'

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Telepipe 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"/>

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>600 +</u>		<u>242</u>	<u>1 hr.</u>

Temperature of Water 64 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 Wasco Latitude _____ Longitude _____
 Township 2N N or S. Range 13E E or W. of WM.
 Section 32 NE SE
 Tax Lot 1200 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address)
2312 W. 8th St., The Dalles, Or. 97058

(10) STATIC WATER LEVEL:

135 ft. below land surface. Date 12/27/97
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 13

From	To	Estimated Flow Rate	SWL
13	15	15	6
97	105		
112	116	60	80
135	162	250+	121
	242	600	135

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Sand Fine Caving Brown	0	13	
See next line	13	15	6
Gravel Large (Boulders) Caving 15 gpm			
Basalt Hard Gray	15	33	
Basalt Soft Black	33	57	
See next line	57	79	
Basalt Fract. Black w/Clay Seams Green			
Basalt Hard Gray	79	85	
Basalt Fract. Brown	85	97	
Basalt Broken W/Yellow Clay W/B	97	105	
Clay stone Hard Green	105	112	
Basalt soft Black W/Clay W/B 60 gpm	112	116	80
Basalt Hard Gray	116	130	
Basalt Hard Black	130	135	
Basalt Broken W/B 250 gpm	135	152	121
Basalt Hard Gray	152	180	
Basalt Hard Black	180	192	
Basalt Hard Gray	192	229	
Basalt Soft Black W/B	229	240	135
Basalt Broken W/B	240	242	135

Date started 9/4/97

Completed 12/27/97

(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 my best knowledge and belief.

Signed _____ WWC Number _____
 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.

Signed [Signature] WWC Number 790
 Date 1-28-98
 Austin Well Drilling

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER

RECEIVED

MAY 21 2009

WATER RESOURCES DEPT
 SALEM, OREGON

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

WASCO WATER WELL REPORT

STATE OF OREGON

(Please type or print) (Do not write above this line)

RECEIVED NOV 24 1967 STATE ENGINEER SALEM OREGON

State Well No.

State Permit No.

well#s 1N/13-5L

002452

(1) OWNER:

Name Mr. Joe J. Fleck
Address Rt. 4 The Dalles, Ore.

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

8" Diam. from 0 ft. to 46 ft. Threaded Welded
Gage .250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Perforated? Yes No.

Type of perforator used _____

Size of perforations in. by in.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name _____ Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WATER LEVEL: Completed well.

Static level 145 ft. below land surface Date 11, 2, 67
Artesian pressure _____ lbs. per square inch Date _____

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No. If yes, by whom? Owner
Yield: 34 gal./min. with 16 ft. drawdown after 1 hrs.

Baller test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water 58 Was a chemical analysis made? Yes No

(10) CONSTRUCTION:

Well seal—Material used Bentonite
Depth of seal _____ 45 ft.
Diameter of well bore to bottom of seal 12 in.
Were any loose strata cemented off? Yes No Depth _____
Was a drive shoe used? Yes No
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel _____
Gravel placed from _____ ft. to _____ ft.

(11) LOCATION OF WELL:

County Wasco Driller's well number _____
N.E. & S.W. 1/4 Section 5 T. 1N. R. 13E. W.M.
Bearing and distance from section or subdivision corner _____

(12) WELL LOG:

Diameter of well below casing 8

Depth drilled 285 ft. Depth of completed well 285 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level as drilling proceeds. Note drilling rates.

MATERIAL	From	To	SWL
Soil, brown	0	5	
Silt,	5	29	
blow sand	29	38	
sandstone, brown	38	40	
clay, yellow, joint	40	41	
sandstone, brown	41	55	
sandstone, brown with trace of yellow clay	55	70	
sandstone, grey	70	78	
clay, joint, blue	78	99	
sandstone, grey	99	105	
sandstone, brown, dk. to lgt.	105	111	
sandstone, grey	111	124	
sandstone, brown	124	175	
sandstone, light to dark	175	180	
sedimentary, blk with clay	180	189	
rock, basalt, black	139	215	145
water encountered			
rock, porous, blk. with white crystals, brown flakes	215	220	220
rock, porous	220	225	
rock, blk, trace blue clay	225	235	
rock, grey, basalt	235	285	
Work started	Sept. 4	67	
Completed	Nov. 2	67	
Date well drilling machine moved off of well	Nov. 4	67	

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Bert Clayton Date 11-21, 1967
(Drilling Machine Operator)

Drilling Machine Operator's License No. 146

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Bert Clayton & Son
(Person, firm or corporation) (Type or print)

Address 2313 E. 10th. The Dalles, Ore

[Signed] Bert Clayton
(Water Well Contractor)

Contractor's License No. 154 Date 11-21, 1967

RECEIVED

MAY 21 2009

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

WELL I.D. # L 54988
START CARD # 123775

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

(1) LAND OWNER: Name Chenoweth PUD WATER Well Number _____
Address P.O. Box 870 (2312 W 8th St)
City The Dalles State OR Zip 97058

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

HOLE SEAL table with columns: Diameter, From, To, Material, From, To, Sacks or pounds

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 table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Drive Shoe used Inside Outside None
Final location of shoe(s) 400'

(7) PERFORATIONS/SCREENS table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 30 gal Drawdown NONE Drill stem at _____ Time 1 hr.

Temperature of water 58 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? No A little A lot
 Salty Muddy Odor Colored
Depth of strata: _____

(9) LOCATION OF WELL by legal description: County Wasco Latitude _____ Longitude _____
Township 1 N or S Range 13 E or W. WM. Section 5 NE 1/4 SW 1/4
Tax Lot 1800 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1976 Cherry Heights

(10) STATIC WATER LEVEL: 329 ft. below land surface. Date 7-20-2003
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES: Depth at which water was first found _____
Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG: Ground Elevation _____

WELL LOG table with columns: Material, From, To, SWL
Handwritten entries: Rap liner, Below clay layer 380, to 400', Drilled to bottom out, to 467', Cleaned out

RECEIVED
AUG 14 2003
WATER RESOURCES DEPT
SALEM, OREGON

Date started 7-20 Completed 7-23-2003

(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 Han WWC Number 1669 Date 8-05-2003

(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 Han WWC Number 1669 Date 8-05-2003

RECEIVED
MAY 21 2009

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WASC 51647

06-24-2008

WELL LABEL # L 66341

START CARD # 1003577

(1) LAND OWNER Owner Well I.D. _____

First Name _____ Last Name _____
Company CHENOWITH WATER PUD
Address 2312 WEST 8TH STREET
City THE DALLES State OR Zip 97058

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(3) DRILL METHOD

Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community

Industrial/ Commercial Livestock Dewatering
 Thermal Injection Other Municipal

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)

Depth of Completed Well 263.00 ft.

BORE HOLE

Dia	From	To	Material	SEAL	To	Amt	sacks/ lbs
40	0	10	Concrete	0	10	270	S
17.5	10	210	Cement	10	210	147	S
12	210	263					

How was seal placed: Method A B C D E

Other _____

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	18		0	10	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	12		2.3	210	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe Inside Outside Other Location of shoe(s) _____

Temp casing Yes Dia 18 From 0 To 10

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type _____ Material _____

Perf/S creen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

Pump Bailer Air Flowing Artesian

Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

880		263	1

Temperature 64 °F Lab analysis Yes By Owner

Water quality concerns? Yes (describe below)

From	To	Description
1003		

RECEIVED
MAY 21 2009

(9) LOCATION OF WELL (legal description)

County Wasco Twp 2.00 N N/S Range 13.00 E E/W WM
Sec 32 NE 1/4 of the SE 1/4 Tax Lot 2N-13-32DA1200

Tax Map Number _____ Lot _____
Lat 45° 36' _____" or 45.60000000 DMS or DD
Long -121° 12' _____" or -121.20000000 DMS or DD

Street address of well Nearest address

2321 West 8Th St. The Dalles

(10) STATIC WATER LEVEL

Existing Well / Predeepening	Date	SWL(psi)	+ SWL(ft)
Completed Well	06-20-2008		106

Flowing Artesian? Dry Hole?

WATER BEARING ZONES

Depth water was first found 182

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
06-14-2008	182	203	220		105
06-20-2008	237	251	880		106

(11) WELL LOG

Ground Elevation 174

Material	From	To
Sand	0	8
Silty sandy clay	8	10
Broken rock, clay sand & gravel	10	17
Grey & black basalt Hard	17	40
Broken black basalt/ blue green shale mixed Med	40	54
Broken visicular grey black rock/ blue green shale & white rock Soft	54	65
Blue green shale/ black& grey visicular rock Med	65	74
Little broken grey & black basalt/ blue green shale in seams Med-Hard	74	79
Grey basalt/ thin seams of shale Hard	79	97
Black & grey basalt/ blue green shale Soft	97	117
Brown & black, red rock Soft to Med	117	143
Grey black basalt visicular/ blue gree shale Soft	143	147
Grey & black basalt little broken	147	152
Grey & black basalt Hard-Med	152	202
Grey basalt Hard	202	232
Grey basalt fractured Hard	232	237
Brown red grey green white visicular rock broken	237	251

Date Started 06-10-2008 Completed 06-20-2008

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number _____ Date _____

Electronically Filed

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1293 Date 06-24-2008

Electronically Filed

Signed JIM I HANSEN (E-filed)

Contact Info (optional)

