

RECEIVED

HOOD  
50046

WELL I.D.# \_\_\_\_\_

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

APR 16 1996

(START CARD) # W 62949

Instructions for completing this report are on the last page of this WATER RESOURCES DEPT.

(1) OWNER: Well Number \_\_\_\_\_  
Name Hood River Co Parks  
Address 918 18th St  
City Hood River State Oro Zip 97031

(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 165 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds	
10	0	41	Benfonite	0	41	21 Sacks	
8	41	59	Grout	41	59	6 Sacks	
6	59	165	open			-	

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:	6	1	59	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	45	165	.250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(7) PERFORATIONS/SCREENS:

Perforations Method Saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
105	165	.087	100	4		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 20 Drawdown 133' Drill stem at 165 Time 1 hr.

Temperature of water 56 F Depth Artesian Flow Found 53'  
Was a water analysis done? No Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use? No Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County Hood River Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 2 N or S Range 10  E or W. WM.  
Section 15 SW 1/4 SW 1/4  
Tax Lot 2600 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Tucker Co Park

(10) STATIC WATER LEVEL:  
32 ft. below land surface. Date 3-27-96  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 102'

From	To	Estimated Flow Rate	SWL
102	155	20	32

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Top Soil + Sand	0	6	-
Boulders	6	22	-
Hard Grey Basalt	22	41	-
Vesicular Brown Basalt	41	52	-
Hard Grey Basalt	52	102	-
Vesicular Red. Brown Gravel	102	155	32
Blue Basalt (4/13)	102	155	32
Hard Grey Basalt	155	165	32

Date started 3-26-96 Completed 3-27-96  
(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 [Signature] 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 Donald H. Keady WWC Number 1521 Date 3-27-96

STATE OF OREGON  
**GEOTECHNICAL HOLE REPORT**  
 (as required by OAR 690-240-035)

*HOOD 50016 HOOD 50046*

(1) OWNER/PROJECT: Hole Number W-62949  
 Name Hood River County Parks  
 Address 918 18th St  
 City Hood River State Ore Zip 97031

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

(3) CONSTRUCTION:  
 Rotary Air  Hand Auger  Hollow Stem Auger  
 Rotary Mud  Cable Tool  Push Probe  Other

(4) TYPE OF HOLE:  
 Uncased Temporary  Cased Permanent  
 Uncased Permanent  Slope Stability  Other

(5) USE OF HOLE: water

(6) BORE HOLE CONSTRUCTION:  
 Special Construction approval  Yes  No Depth of Completed Hole 165 ft.

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10	0	41	Bentonite	0	41	21 Sacks
8	41	59	Grout	41	59	6 Sacks
6	59	165	—			—

Backfill placed from — ft. to — ft. Material —  
 Filter Pack placed from — ft. to — ft. Size of pack —

(7) CASING/SCREEN:

	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	6	0	59	.250	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
	4	45	165	.250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Screen:	4	105	165	.250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Slot size .087 x 6

(8) WELL TEST:  
 Pump  Bailer  Air  Flowing Artesian  
 Permeability \_\_\_\_\_ Yield \_\_\_\_\_ GPM 20  
 Conductivity \_\_\_\_\_ PH \_\_\_\_\_  
 Temperature of water 56.5 °F/C Depth artesian flow found 53 ft.  
 Was water analysis done?  Yes  No  
 By whom? \_\_\_\_\_  
 Depth of strata analyzed. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
 Remarks: \_\_\_\_\_

(9) LOCATION OF HOLE by legal description:  
 County Hood River Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 2 N or S Range 10 E E or W. WM.  
 Section 15 SW 1/4 SW 1/4  
 Tax Lot 2600 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) Tucker County Park

Map with location identified must be attached

(10) STATIC WATER LEVEL:  
32 ft. below land surface. Date 3-27-96  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) SUBSURFACE LOG:  
 Ground Elevation \_\_\_\_\_

Material Description	From	To	SWL
Top Soil + Sand	0	6	—
Boulders	6	22	—
Hard Grey Basalt	6	41	—
Vesicular Brown Basalt	41	52	—
Hard Grey Basalt	52	102	—
Vesicular Red Brown Green + Blue Basalt	102	155	32
Hard Grey Basalt	155	165	32

Date Started 3-26-96 Date Completed 3-27-96

(12) ABANDONMENT LOG:

Material Description	From	To	Sacks or Pounds
MAR 29 1996			
WATER RESOURCES DEPT. SALEM, OREGON			

Date started \_\_\_\_\_ Date Completed \_\_\_\_\_

**Professional Certification**  
 (to be signed by a licensed water supply or monitoring well constructor, or registered geologist or civil engineer).

I accept responsibility for the construction, alteration, or abandonment work performed on during the construction dates reported above. All work performed during this time is in compliance with Oregon geotechnical hole construction standards. This report is true to the best of my knowledge and belief.

License or Registration Number 1521  
 Signed Donald H. Keefe Date 3-27-96  
BILLS well Drilling  
 Affiliation owner

**THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK**

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