

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

WASC
 002642

JUL 18 1989

start Card # 9424

1N/3E/27 66

(1) **OWNER:** Name Richard Lunceford Well Number: _____
 Address 3153 Three Mile Rd
 City The Dalles State Or Zip 97058

(2) **TYPE OF WORK:**
 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 261 ft.
 Yes No
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
From	To	Material	From	To		
12	0	38				
8	38	260	Cement	0	25	14 Bags

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: 8"	+1	39	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
6"	+1	139	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"/>
				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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 _____
 50 _____ 260 _____ 1 hr.

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 by legal description:**
 County Wasco Latitude _____ Longitude _____
 Township 1 N N or S, Range 13 E E or W, WM.
 Section 27 NW $\frac{1}{4}$ NW $\frac{1}{4}$
 Tax Lot 3400 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____
3153 Threemile Rd

(10) **STATIC WATER LEVEL:**
 _____ ft. below land surface. Date 7-6-89
 Artesian pressure _____ lb. per square inch. Date _____

(11) **WATER BEARING ZONES:**

Depth at which water was first found 225

From	To	Estimated Flow Rate	SWL
225	241	50	125

(12) **WELL LOG:** Ground elevation _____

Material	From	To	SWL
Boulders	0	18	
Claystone yellow	18	35	
Sandstone fine tan			
Sand brown	75	95	
Clay Stone Green	95	105	
Rock Soft Blk	105	112	
Basalt	112	123	
Clay GreenClayStone	123	125	
Sandstone	125	150	
Rock Fract Blk	150	209	
Sandstone	209	212	
Basalt hard fract blk	212	218	
Sandstone Coarse Brn	218	225	
Basalt fract grey W/B	225	241	
Basalt fract soft grey			
	W/B	241	261

Date started 7-1-89 Completed 7-6-89

(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.
 Signed _____ WWC Number 790
 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 *Charles [Signature]* WWC Number 790
 Date 7-14-89