

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

003222

MAR 24 1989

Start Card # 0854

2/13/89/dd

(1) **OWNER:** Well Number: \_\_\_\_\_  
 Name The Dalles Country Club  
 Address 4550 Hwy 30n West.  
 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:**  
 Local Construction approval Yes  No  Depth of Completed Well 307 ft.  
 Explosives used  Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Amount
Diameter	From To	Material	From To	sacks or pounds
	N/A	N/A		

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	300	.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) 300 ft.

(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 350+ Drawdown \_\_\_\_\_ Drill stem at 300 Time 1 hr.

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 13 E E or W, WM.  
 Section 17 SE ¼ SE ¼  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) Hwy 30

(10) **STATIC WATER LEVEL:**  
173 ft. below land surface. Date 3-20-89  
 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
Bottom of the well was 233 cleaned the well out to 346 Cased to 300 ft. hole below the casing would not stay open formation from 223 to 327 was a broken basalt grey W/B			173
Soft	327	346	

Date started 3-6-89 Completed 3-20-89

(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 \_\_\_\_\_  
 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 [Signature] WWC Number 790  
 Date 3-22-89