

AUG 21 1961

WATER WELL REPORT **WASC**
STATE OF OREGON **WASC 3558**
003558

State Well No. 4/2-4 R
State Permit No. _____

(1) OWNER:
Name Camp Morrow Bible Conference
Address Mrs. Vonna Anderson, 12 Park,
The Dalles, Oregon

(2) LOCATION OF WELL:
County Wasco Owner's number, if any—
NW ¼ SE ¼ Section 4 T. 4 S R. 12 E W.M.
Bearing and distance from section or subdivision corner
From the northwest corner - 660' feet south,
915' east to well site.

(3) TYPE OF WORK (check):
New 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) TYPE OF WELL:
Rotary Driven
Cable Jetted
Dug Bored

(6) CASING INSTALLED: Threaded Welded
.....6....." Diam. from0..... ft. to38..... ft. Gage250.....
....." Diam. from ft. to ft. Gage
....." Diam. from ft. to ft. Gage

(7) 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.

(8) SCREENS: Well screen installed Yes No
Manufacturer's Name _____
Type _____ Model No. _____
..... Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(9) CONSTRUCTION:
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from ft. to ft.
Was a surface seal provided? Yes No To what depth?38..... ft.
Material used in seal— cement
Did any strata contain unusable water? Yes No
Type of water? _____ Depth of strata _____
Method of sealing strata off _____

(10) WATER LEVELS:
Static level 259 ft. below land surface Date 8/14/61
Artesian pressure _____ lbs. per square inch Date _____

Log Accepted by:
[Signed] W. Wilburn Date Aug. 17, 1961
(Owner)

(11) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
Yield: _____ gal./min. with _____ ft. drawdown after _____ hrs.
" " " " "
" " " " "
Bailer test 11.8 gal./min. with 4 ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water _____ Was a chemical analysis made? Yes No

(12) WELL LOG: Diameter of well6..... inches.
Depth drilled 350 ft. Depth of completed well 350 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.

MATERIAL	FROM	TO
Soil, claystone	0	3
Fine & boulder conglomerate	3	15
Fine sandstone, brown	15	31
Course sandstone, gray , brown	31	46
Course sandstone, grey, hard	46	48
Cobble & boulder cong. Dif. Drill.	48	67
Lava, basalt? Blue, fine grained	67	76
Basalt, blue. Hard	76	85
Basalt, grey. Hard	85	106
Fine conglomerate, basalt fragmen	106	109
Fine conglomerate, some clay (ts)	109	121
Fine conglomerate, brown	121	159
Course conglomerate, lt. brown	159	180
Fine conglomerate, lt. brown	180	198
Fine conglomerate, brown, some clay	198	240
Lava, black, soft	240	251
Basalt, blue, hard	251	261
Fine conglomerate, lower area		
water bearing	261	350

Work started 7/24/60 19 _____ Completed 8/14/60 19 _____

(13) PUMP:
Manufacturer's Name _____
Type: _____ H.P. _____

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 Dorin Wilburn
(Person, firm, or corporation) (Type or print)
Address 812 E 7th Street, The Dalles, Ore
Driller's well number _____

[Signed] Dorin Wilburn
(Well Driller)
License No. 80 Date Aug. 17, 1961



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for
Well ID Number

RECEIVED

JUN 08 2011

WATER RESOURCES DEPT
SALEM, OREGON

Do not complete if the well already has a Well I.D Number.

I. OWNER INFORMATION

Current Owner Name (please print): Camp Morrow Bible Conference
Mailing Address: 79551 Morrow Road
City: Tygh Valley State: OR Zip: 97063
Mailing Address (to send Well I.D.): Same as owner
City: State: Zip:

II. WELL INFORMATION (Do not complete this section if the well report is attached.)

Township: (North/South) Range: (East/West) Section:
Tax Lot: 4S 12E 4 600 County: 1/4 1/4
Street Address of Well: 79551 Morrow Road City: Tygh Valley
Owner at time the well was constructed, (if known):
If the property had a different street address in the past:

III. GENERAL WELL INFORMATION (Do not complete this section if the well report is attached)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): See WASC 3558
Date Well Constructed: Total Well Depth: Casing Diameter:
Other Information:

SUBMITTED BY (please print): Chip Shetler for Camp Morrow
PHONE: 541-544-2971 FAX:

Send application to Oregon Water Resources Department; 725 Summer St NE, Suite A; Salem, Oregon 97301-1266; fax (503) 986-0902. Applications are processed and Well I.D. Numbers are mailed every Wednesday.

WASC 3558

L-107310

For Official Use Only by the Oregon Water Resources Department:
Received Date: Well Log Number: Well Identification #: