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

WASC
50145

SEP 12 1996

ID# L02143

WATER RESOURCES DEPT. (START CARD) # **W 86103**

(1) OWNER: Well Number 1
 Name **WASCO COUNTY-CRATES PT**
 Address **CRATES POINT RESERVOIR SITE**
 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 603' ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
15"	top	19'	Cement	top	19'	12 sacks
10"	19'	550'				
6"	550'	603'				

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: 10"	-1	19		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 8"	-1	549'		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 19' 10" shoe 549' 7 1/2" shoe

(7) PERFORATIONS/SCREENS:
 Perforations Method N/A
 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

Yield gal/min	Drawdown	Drill stem at	Time
400	100%	593'	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? 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. WM.
 Section **20** **NE** 1/4 **NE** 1/4
 Tax Lot **400** Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) **DISCOVERY CNT HWY 30, HISTORIC COL RIVER HWY-TD**

(10) STATIC WATER LEVEL:
290' ft. below land surface. Date **08-22-96**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found **549'**

From	To	Estimated Flow Rate	SWL
549'	570'		290
586'	603'		290

(12) WELL LOG:
 Ground elevation _____

Material	From	To	SWL
Top Soil, fract Basalt + Boulders	0	4	
Gray + Brown Basalt, weathered	4	13	
Gray Basalt, Hard	13	32	
Gray Basalt w/Black + green seams	32	51	
Gray Basalt w/Brown seams	51	65	
Gray + Black Basalt, Med Hard	65	105	
Gray Basalt, Hard	105	131	
Black + Gray Basalt, vesicular	131	139	
Gray Basalt, Med Hard	139	147	
Gray Basalt, Hard	147	273	
Black Basalt + Pyrite, vesicular	273	289	
Black Basalt, Phraus	289	306	
Gray Basalt w/Green Seams	306	314	
Gray Basalt, Hard	314	525	
Green + Gray Claystone	525	549	
Basalt, vesicular, Water Bearing	549	570	290
Gray Basalt, Hard w/seams	570	586	290
Gray + Black Basalt, creviced, Water Bearing	586	603	290

Date started **08-07-96** Completed **08-22-96**

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

WWC Number _____
 Signed _____ 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.

WWC Number **0731**
 Signed Charles S Moore Date **08-22-96**