

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

WATER RESOURCES DEPT.  
 SALEM, OREGON

WASC  
 50457

WELL ID # **L14032**  
 (START CARD) # **095973**

Instructions for completing this report are on the last page of this form

**(1) OWNER:** Well Number: **1-B**  
 Name **Chenoweth Irrigation Co-op**  
 Address **2312 W 8th St.**  
 City **The Dalles,** State **OR** Zip **97058**

**(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 **242** ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	secks or pounds
18"	0	194	Cement	0	165	250 Bags
12"	194	220				
10"	220	242				

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: 12"	+1.5	165	.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) **165'**

**(7) PERFORATIONS/SCREENS:**

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"/>

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailor  Air  Flowing Artesian  
 Yield gal/min \_\_\_\_\_ Drawdown \_\_\_\_\_ Drill stem at \_\_\_\_\_ Time \_\_\_\_\_  
**600 +** \_\_\_\_\_ **242** \_\_\_\_\_ **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 **13E** E or W. of WM.  
 Section **32** **NE**  $\frac{1}{4}$  **SE**  $\frac{1}{4}$   
 Tax Lot **1200** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address)  
**2312 W. 8th St., The Dalles, Or. 97058**

**(10) STATIC WATER LEVEL:**  
**135** ft. below land surface. Date **12/27/97**  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**  
 Depth at which water was first found **13**

From	To	Estimated Flow Rate	SWL
13	15	15	6
97	105		
112	116	60	80
135	152	250+	121
229	242	800	135

**(12) WELL LOG:**  
 Ground elevation \_\_\_\_\_

Material	From	To	SWL
Sand Fine Caving Brown	0	13	
See next line	13	15	6
Gravel Large (Boulders) Caving 15 gpm			
Basalt Hard Gray	15	33	
Basalt Soft Black	33	57	
See next line	57	79	
Basalt Fract. Black w/Clay Seams Green			
Basalt Hard Gray	79	85	
Basalt Fract. Brown	85	97	
Basalt Broken W/Yellow Clay W/B	97	105	
Clay stone Hard Green	105	112	
Basalt soft Black W/Clay W/B 60 gpm	112	116	80
Basalt Hard Gray	116	130	
Basalt Hard Black	130	135	
Basalt Broken W/B 250 gpm	135	152	121
Basalt Hard Gray	152	180	
Basalt Hard Black	180	192	
Basalt Hard Gray	192	229	
Basalt Soft Black W/B	229	240	135
Basalt Broken W/B	240	242	135

Date started **9/4/97** Completed **12/27/97**

**(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 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 water supply well construction standards. This report is true to the best of my knowledge and belief.  
 Signed *Austin Well Drilling* WWC Number **790**  
 Date **1-28-98**