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

JAN 31 2001

WELL I.D. # L 38619
START CARD # 129885

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

(1) LAND OWNER
Name Gene Byers
Address 3693 13 Mile Rd.
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 535 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
14"	0	36				
10"	36	55	Cement	21	55	10 sacks
8"	55	535				

How was seal placed: Method A B C D E
 Other Modified E
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Inner Casing:	8"	21	55	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	6"	495	535	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method Torchcut
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
495	535	1/8 x 3	3 Rows		6"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing Time
400+		535	1 hr.

Temperature of water 59° 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 14E E or W. WM.
Section 32 SW 1/4 SW 1/4
Tax Lot 500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 3693 13 Mile Rd.
The Dalles, OR 97058

(10) STATIC WATER LEVEL:
28 ft. below land surface. Date 9-9-00
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
<u>Repair-recondition procedure:</u>			
<u>Reamed hole 8" to 10" from 36' to 55'. Set 40' 6" liner from 495' to 535'. Perforated liner. Set 34' 8" inner casing from 21' to 55'. Set cement plug at 55', 10 sacks cement. Drilled out plug.</u>			
<u>Brian Mayer, Water Resources inspector, was present during procedure pertaining to 8" inner casing and cement.</u>			

Date started 9-6-00 Completed 9-9-00

(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 the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 1218
Signed Petrick Wallace Date 10-1-00