

STATE OF OREGON  
**WATER SUPPLY WELL REPORT**

(as required by ORS 537.765)

(START CARD) # 148832

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

**(1) OWNER:** Well Number: \_\_\_\_\_  
 Name **Fritz Ellett**  
 Address **3815 Browns Creek 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 **196** ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
12"	0	40	Bentonite	0	40	68 Bags
8"	40	196				

How was seal placed: Method  A  B  C  D  E  
 Other **Poured Dry**  
 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"	+2	78	.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) **78 ft.**

**(7) PERFORATIONS/SCREENS:**

Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<b>40</b>		<b>196</b>	<b>1 hr.</b>

Temperature of Water **59** Depth Artesian Flow found \_\_\_\_\_  
 Was a water analysis done?  Yes  No 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 **1N** N or S. Range **12E** E or W. of WM. \_\_\_\_\_  
 Section **1** SW 1/4 NW 1/4  
 Tax lot **2000** Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) **3715 Browns Creek Rd., The Dalles, Or.**

**(10) STATIC WATER LEVEL:**  
**120** ft. below land surface. Date **07/20/2002**  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

**(11) WATER BEARING ZONES:**  
 Depth at which water was first found **128**

From	To	Estimated Flow Rate	SWL
<b>128</b>	<b>186</b>	<b>40</b>	<b>120</b>

**(12) WELL LOG:**

Material	From	To	SWL
Soil	0	2	
Sandstone Fine Hard Tan	2	26	
Clay & Gravel Large Multi Color	26	75	
Gravel Coarse Multi-Color	75	95	
Sandstone Fine Hard Tan	95	128	
Sandstone Fine Soft Brown W/B	128	186	
Sandstone Fine Soft Black W/White Crystals	186	196	120

RECEIVED

JUL 25 2002

WATER RESOURCES DEPT.  
 SALEM, OREGON

Date started **07/13/2002** Completed **07/20/2002**

**(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.

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 **790**  
 Signed *Charles Austin* Date **07/22/2002**

**Charles Austin**