

(1) LAND OWNER
 Name Phil Kaser Well Number _____
 Address 4965 Fifteen 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 22 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
54"	0	22				

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:					<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"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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"/>

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

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Material	
						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

Yield gal/min	Drawdown	Drill stem at	Time 1 hr.

Temperature of water _____ 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 _____

(9) LOCATION OF WELL by legal description:
 County WASCO Latitude _____ Longitude _____
 Township 2N N or S Range 14E E or W. WM.
 Section 27 SW 1/4 NE 1/4
 Tax Lot 100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 4456 Fifteen Mile Rd.

(10) STATIC WATER LEVEL:
12 ft. below land surface. Date 6/16/1967
 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
Alluvial Sediments	0	10	
Basalt	10	22	
The well is in 15 Mile ck floodplain. It is underlain by an unknown thickness of alluvial sediments. Basalt flows of the Columbia River Basalt Group have been incised by the creek. Recent geologic mapping indicates that 15 Mile ck has incised into Sentinel Gap or Sand Hollow flows of the Frenchman Springs Member. This well is completed in one of these two units.			
Date of construction is unknown, but is probably 1940's or 1950's.			

Date started _____ Completed _____
 SOURCE OF DATA/INFO Survey by DWRD staff on 6/16/1967, found in application file G-2941.

COMPILED BY: Josh Hackett
DWRD Groundwater Section
 DATE: July 9, 2015

JUL 09 2015
 WATER RESOURCES DEPT
 SALEM, OREGON