

STATE OF OREGON
WATER SUPPLY WELL REPORT

WASC 52949

WELL I.D. LABEL# L

151058

START CARD #

1071850

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

7/22/2024

(1) LAND OWNER

Owner Well I.D. _____

First Name DAVID

Last Name BROWN

Company _____

Address 3465 THREE MILE RD

City THE DALLES

State OR

Zip 97058

(2) TYPE OF WORK

☒ New Well☐ Deepening☐ Conversion☐ Alteration (complete 2a & 10)☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing:

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

Seal:

Material	From	To	Amt	sacks/lbs

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other _____

(4) PROPOSED USE

☐ Domestic☒ Irrigation☐ Community☐ Industrial/ Commercial☐ Livestock☐ Dewatering☐ Thermal ☐ Injection ☐ Other _____

(5) BORE HOLE CONSTRUCTION

Special Standard ☒ (Attach copy)

Depth of Completed Well 630.00 ft.

BORE HOLE				SEAL				sacks/
Dia	From	To	Material	From	To	Amt	lbs	
17.5	0	351	Bentonite Chips	0	351	461	S	
12	351	670			Calculated	433		
					Calculated			

Seal placement method ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: POURED IN

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____

Seal Placement Begin Date 3/8/2024 Begin Time 12 35

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount

Actual Amount

(6) CASING/LINER

C/L	Dia	+	From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	12	X	1	351	.250	ST	X			

Temp casing ☐ Yes Dia _____ From _____ + _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ Pipe size

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

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	300		670	8

Temperature 54 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 111 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County WASCO Twp 1.00 N N/S Range 13.00 E E/W WM

Sec 33 NW 1/4 of the NW 1/4 Tax Lot 1100

Tax Map Number _____ Lot _____

Lat _____ " or 45.53166000 DMS or DD

Long _____ " or -121.20854000 DMS or DD

☒ Street address of well ☐ Nearest address

3465 THREE MILE RD, THE DALLES, OR 97058

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	6/24/2024			305
Flowing Artesian?	<input type="checkbox"/>			
Dry Hole?	<input type="checkbox"/>			

WATER BEARING ZONES

Depth water was first found 291.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
10/27/2023	291	320	50			241
11/9/2023	415	670	300			305

(11) WELL LOG

Ground Elevation _____

Material	From	To
Sandy shale	0	4
Sandstone	4	42
Medium hard gray basalt	42	110
Soft gray basalt	110	142
Medium hard gray basalt	142	187
Hard gray basalt	187	218
Medium hard gray basalt	218	321
Medium hard black basalt	321	415
Hard black basalt	415	615
Hard black basalt w/ gray sandstone	615	655
Very hard black basalt (fractured)	655	670

Construction

Begin Date 10/20/2023 Begin Time 13 00 End Date 6/24/2024

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number 1738 Date 7/22/2024

Signed VANCE WAGNER (E-filed)

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1738 Date 7/22/2024

Signed VANCE WAGNER (E-filed)

Drilling Company: Olsen Well Drilling And Pump

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

New exempt use wells must be submitted with a map and recording fee.

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

WASC 52949

7/22/2024

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 45.53166000 Datum: WGS84

Longitude: -121.20854000

Township/Range/Section/Quarter-Quarter Section:

WM1.00N13.00E33NWNW

Address of Well:

3465 THREE MILE RD, THE DALLES, OR 97058

Well Label: 151058

Printed: July 22, 2024

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



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