STATE OF OREGON
WATER RESOURCES DEPARTMENT

REQUEST FOR WRITTEN APPROVAL TO USE CONSTRUCTION METHODS NOT INCLUDED IN THE OREGON ADMINISTRATIVE RULES 690-200 THROUGH 690-240.

Before request can be considered, the following must be answered. Requests shall be submitted to the Well Construction Specialist, Water Resources Department. Requests may also be considered by the appropriate Regional Manager.

Date of Request: 11-11-96

Bonded Well Constructor(name,license and mailing address): QUINN'S WELL DRILLING INC 1680 REDWOOD AVE
GRANTS PASS, ORE 97527

(1) Location of Well: NW 1/4 SW 1\4 of Section, 23
Township 36 , Range 6 W , JOSEPHINE County.

Address at well site: TWILIGHT VIEW ESTATES
TAX LOT 3000

(2) Start Card Number(s): 90798

(3) Name and address of Landowner: BOLTZ CONST.233 ROGUE RIVER HWY.GRANTS PASS ORE 97527

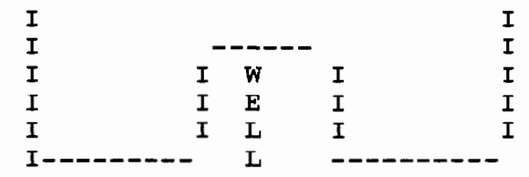
(4) The distance to the nearest well, septic tank or drain-field (if water supply well): 100 FT.

(5) The unusual conditions which necessitate this request:
WANT TO PUT A WELL IN A PIT

(6) The proposed construction methods that the well constructor believes will be adequate for this well(attach additional pages if needed): DIG PIT AND MAKE SURE THE WELL CASING IS A MINIMUM OF 12 INCHES ABOVE THE BOTTOM OF PIT INSTALL A DRAIN TO DAYLIGHT.

SC 90798

(7) Diagram showing the pertinent features of the proposed well design and construction (attach additional pages if needed):



PLEASE NOTE:

(1) If approved, all other phases of well construction must comply with the appropriate standards described in OAR 690-200 through 690-240.

(2) If it should be determined at some future date that the well, due to its construction, is allowing groundwater contamination, waste or loss or artesian pressure, the undersigned shall return to the site and rectify the problem.

(3) If verbal approval was granted, a written request must be submitted to the Department either within three (3) working days of the date of verbal approval or prior to the completion of the associated well work. Failure to submit a written request as described above may void prior approval.

I have read and understand the above information. I further attest that the information provided is accurate to the best of my knowledge.

Bonded Constructor Signature: ____BOB QUINN_____

For Water Resources Department Use Only

Date: 11/21/96

Approved By:

Denied By:

Remarks: