

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

Jack 34948

WATER WELL REPORT STATE OF OREGON

(Please type or print)

(Do not write above this line)

RECEIVED SEP 24 1976 WATER RESOURCES DEPT.

Date Well No. 376/W-25

State Permit No.

(1) OWNER:

Name ROBERT ROBERTSON Address 132 WEST MAIN SUITE 204 MEDFORD, ORE.

(2) TYPE OF WORK (check):

New Well [X] Deepening [] Reconditioning [] Abandon []

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary [X] Cable [] Driven [] Jetted [] Bored []

(4) PROPOSED USE (check):

Domestic [X] Industrial [] Municipal [] Irrigation [] Test Well [] Other []

CASING INSTALLED:

6" Diam. from 0 ft. to 87 ft. Gage .250

PERFORATIONS:

Perforated? [] Yes [X] No

Type of perforator used

Size of perforations in. by in. perforations from ft. to ft.

(7) SCREENS:

Well screen installed? [] Yes [X] No

Manufacturer's Name Type Model No. Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? [] Yes [X] No If yes, by whom? Yield: gal./min. with ft. drawdown after hrs.

AIR RETURN WATER test 16 gal./min. with 31 ft. drawdown after 1 hrs.

Artesian flow g.p.m. Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Pressure Cement Grout Well sealed from land surface to 42 ft. Diameter of well bore to bottom of seal 7 7/8 in. Diameter of well bore below seal 6 in. Number of sacks of cement used in well seal 15 sacks Number of sacks of bentonite used in well seal Brand name of bentonite Number of pounds of bentonite per 100 gallons of water Was a drive shoe used? [X] Yes [] No Plugs Size: location ft. Did any strata contain unusable water? [] Yes [X] No Type of water? depth of strata Method of sealing strata off Was well gravel packed? [] Yes [X] No Size of gravel: Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County JACKSON Driller's well number N.E. Section 25 T. 37 S. 1W. W.M.

Bearing and distance from section or subdivision corner APPROX. 100' W. AND 1800' S. FROM N.E. CORNER

(11) WATER LEVEL: Completed well.

Depth at which water was first found 101 ft. Static level 82 ft. below land surface. Date 9-14-76 Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 6" Depth drilled 122 ft. Depth of completed well 113 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

Table with columns: MATERIAL, From, To, SWL. Rows include SOIL BLACK, CLAY BROWN, BROKEN ROCK BROWN, CLAYSTONE BROWN, CLAY BROWN, CLAYSTONE BROWN, BROKEN ROCK BROWN, CLAYSTONE BLUE, LAVA GREY.

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WATER RESOURCES DEPT SALEM, OREGON

Work started 9-14 1976 Completed 9-14 1976 Date well drilling machine moved off of well 9-15 1976

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Ronald Martinson Date 9-15, 1976 (Drilling Machine Operator)

Drilling Machine Operator's License No. 622

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name MARTINSON WELL DRILLING (Person, firm or corporation) (Type or print)

Address 81 BALL RD. EAGLE POINT, ORE.

[Signed] J.W. Martinson (Water Well Contractor)

Contractor's License No. 406 Date 9-15, 1976

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report
are to be filed with the

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date
of well completion.

nc

WATER WELL REPORT

STATE OF OREGON
(Please type or print)

(Do not write above this line)

Jack
11907

State Well No. 375/1W 25

State Permit No.

(1) OWNER:

Name ROBERT JACOBSON
Address 2123 CAPITAL
MEDFORD, ORE.

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Cable Dug
Driven Jetted Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) CASING INSTALLED:

6" Diam. from 0 ft. to 164 ft. Gage 250
Threaded Welded

(6) PERFORATIONS:

Perforated? Yes No.

Type of perforator used

Table with columns: Size of perforations, in. by, in., ft. to ft. perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name
Type Model No.
Diam. Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?
AIR RETURN
60 gal./min. with 77.5 ft. drawdown after 1 hrs.
Artesian flow g.p.m.
Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used PORTLAND CEMENT
Well sealed from land surface to 162 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in.
Number of sacks of cement used in well seal 40 sacks
How was cement grout placed? PRESSURE GROUT, TRIMMIE PIPE
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel:
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County JACKSON Driller's well number
1/4 N.E. 1/4 Section 25 T. 375 R. 1W. W.M.

Bearing and distance from section or subdivision corner
APPROX. 200' S. AND 800' W. FROM N.E. CORNER

(11) WATER LEVEL: Completed well.

Depth at which water was first found 193 ft.
Static level 180 ft. below land surface. Date 2-10-77
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 6"

Depth drilled 405 ft. Depth of completed well 405 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

Table with columns: MATERIAL, From, To, SWL. Rows include SOIL, BLACK; CLAY, Yellow; CLAY, BROWN; CLAYSTONE, RED; CLAYSTONE, BLUE; CLAYSTONE, BLUE HARD.

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FEB 14 1977

WATER RESOURCES DEPT. SALEM, OREGON

Work started 2-8 1977 Completed 2-10 1977
Date well drilling machine moved off of well 2-10 1977

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] Ronald Montano Date 2-10, 1977
(Drilling Machine Operator)

Drilling Machine Operator's License No. 622

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name MARTINSON WELL DRILLING
(Person, firm or corporation) (Type or print)

Address 81 BALL RD. EAGLE POINT, ORE.

[Signed] J.W. Martinson
(Water Well Contractor)

Contractor's License No. 406 Date 2-11, 1977

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

RECEIVED

SEP 11 1986

Jack 11901

375/100-2500

WATER RESOURCES DEPT

(1) **OWNER:** Name ROBERT JACOBSON Owner's Well Number SALEM, OREGON
 Address 6351 HILLCREST RD.
 City MEDFORD, State OR Zip 97504

LOCATION OF WELL by legal description:
 County JACKSON Latitude _____ Longitude _____
 Township 37 N or S, Range 1W E or W, WM.
 Section 25 NE ¼ NE ¼
 Tax Lot BOCCA Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) SAME AS # 1

(2) **TYPE OF WORK:**
 New Well Deepen Recondition Abandon
 (3) **DRILL METHOD:**
 Rotary Air Rotary Mud Cable Other

(4) **PROPOSED USE:**
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) **BORE HOLE CONSTRUCTION:**
 Depth of Completed Well 227 ft.
 Special Standards date of approval _____

HOLE	SEAL	Amount
meter From To	Material From To	sacks or pounds
0 180	CEMENT 0 180	40 SACKS
		52 BENTONITE

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:**

Casing:	Diameter	From	To	Gauge	SEAL			
					Steel	Plastic	Welded	Threaded
	6	72	183	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"/>

Location of shoe(s) 183

(7) **PERFORATIONS/SCREENS:**

From	To	Slot size	Number	Diameter	Tele/pipe size	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"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Pumping level	Drill stem at	Time ¼ hr
30	—	227	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 strata: _____

(10) **STATIC WATER LEVEL:**
120 ft. below land surface. Date 9-3-86
 Artesian pressure _____ lb. per square inch. Date _____

(11) **WELL LOG:** Ground elevation _____

Material	From	To	WB?	SWL
SOIL, BROWN	0	2		
CLAY, BROWN	2	86		
CLAY, RED	86	137		
CLAYSTONE, BROWN	137	211		
CLAYSTONE, BLUE	211	220	30	
BASALT, BLUE, MEDIUM	220	287		120

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WATER RESOURCES DEPT
 SALEM, OREGON

Date started 9-2-86 Completed 9-3-86

(unbonded) Water Well Constructor Certification:
 I constructed this well in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed Joachim Mathen Date 9-3-86

(bonded) Water Well Constructor Certification:
 I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my knowledge and belief.
 Signed Ronald J. Mathen Date 9-3-86
 Company MARTINSON WELL DRILLING, INC Job No. _____

OCT '86 1988

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

WATER RESOURCES DEPT
SALEM, OREGON

Jack
11894

378/1W/25

(START CARD) # ~~XXXXXX~~ 7786

(1) OWNER: Well Number 7786
Name SUNRIDGE ESTATES
Address 6351 HILLCREST ROAD
City MEDFORD State OR Zip 97504

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 394 ft.
Explosives used Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
10"	0 165	CEMENT	0 165	39 SACKS	
6"	165 394				

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: 6"	2	168	.25	<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) 168

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 15 GPM Drawdown 214 Drill stem at 394 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 strata: _____

(9) LOCATION OF WELL by legal description:
County JACKSON Latitude _____ Longitude _____
Township 37N N or S, Range 1W E or W, WM.
Section 25 1/4 _____ 1/4 _____
Tax Lot 200CA Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) SAME AS #1

(10) STATIC WATER LEVEL:
180 ft. below land surface. Date 9-13-88
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 201

From	To	Estimated Flow Rate	SWL
201	202	4GPM	
306	307	15GPM	180

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
SOIL, BROWN	0	2	
CLAY, BROWN	2	141	
CLAYSTONE, BROWN	141	161	
CLAYSTONE, BLUE	161	394	180

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WATER RESOURCES DEPT
SALEM, OREGON

Date started 9-9-88 Completed 9-13-88

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

WWC Number _____
Signed MEDINA WELL DRILLING 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 well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 3286
Signed Joaquin Medina Date 9-13-88

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

JACK 51082
WELL I.D.# L03250

(START CARD) # 82798

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

(1) OWNER: Well Number L03250
Name Jay & Virginia Mays
Address 1021 Pine Ridge Rd.
City Madras State OR Zip 97504

(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 590'
Explosives used Yes No Type _____ Amount _____

HOLE		SEAL					
Diameter	From To	Material	From To	Sacks or pounds			
12"	0	BENTONITE	0	30	SIL		
6"	0	SDS	0				

How was seal placed: Method A B C D E
 Other amped in day
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: 6"	1	13.6	120	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	0	590		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

Perforations Method saw cut
 Screens Type 4" PVC Material 4" PVC

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
480	590	1/4"	95	4x12"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
7	590	590'	1 hr.

Temperature of water 51° 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 Tillamook Latitude _____ Longitude _____
Township 37 N or S Range 1 E or W WM.
Section 25A NE 1/4 NE 1/4
Tax Lot 105 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:
87' ft. below land surface. Date 7/16/96
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 505'

From	To	Estimated Flow Rate	SWL
505'	510'	7	87

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
CLAY - BASALT BLEN	0	8	
CLAYSTONE	8	37	
CLAYSTONE BASALT - BLEN	37	74	
SANDSTONE	74	75	
SANDSTONE	75	97	
CLAY BASALT BLEN	97	129	
SANDSTONE	129	590	87

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MAY 16 1997

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SALEM, OREGON

JUN 09 2312

WATER RESOURCES DEPT
SALEM, OREGON

Date started 290596 Completed 7/16/96
(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 1457
Signed _____ Date 30/1/99

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

(1) LAND OWNER Owner Well I.D. _____
 First Name _____ Last Name _____
 Company SUNDRIDGE ESTATES HOA
 Address 6556 HILLCREST RD
 City MEDFORD State OR Zip 97504

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Reverse Rotary Other _____

(4) PROPOSED USE Domestic Irrigation Community
 Industrial/Commercial Livestock Dewatering Injection
 Thermal Other PUBLIC USE

(5) BORE HOLE CONSTRUCTION Special Standard: Yes (attach copy)
 Depth of Completed Well 26 ft. WELL CAVED

BORE HOLE				SEAL			
Dia	From	To	Material	From	To	Amount	Scks/lbs
10"	0	25	COATED BENTONITE PELLETS	16	18 1/2	100 #	
6"	25	30	BENTONITE CHIPS	0	16	19 2/3 SACKS	

How was seal placed: Method A B C D E
 Other POURED DRY
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from 13 ft. to 25 ft. Material 7/8 GRAVEL Size 3/8
 Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Linr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		6	X	1 1/2	18 1/2	.250	X			
	X	4		2 1/2	26	CL 160		X	X	

Shoe Inside Outside Other Location of shoe(s) _____
 Temporary casing Yes Diameter 6" From 13/4 To 18 1/4

(7) PERFORATIONS/SCREENS
 Perforations Method _____
 Screens Type SLOTTED Material 24 40 PVC

Perf	Scrn	Casing	Linr	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size
X		X		4"	18	26	.020			

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
 Yield gal/min 8.15 Drawdown _____ Drill stem/Pump depth 19 1/2 Duration (hr) 1 HR 18 MINS

Temperature 59 °F Lab analysis Yes No
 Water quality concerns? Yes (describe below) _____
 From RECEIVED Description JUL 09 2009 Units _____
RECEIVED WATER RESOURCES DEPT SALEM, OREGON
JUL 27 2009

(9) LOCATION OF WELL (legal description)
 County JACKSON Twp 37S N or S Range 1E E or W W.M.
 Sec 25 SE 1/4 of the NE 1/4 Tax Lot 2300
 Tax Map Number _____ Lot _____
 Lat _____ " or 42.32550 DMS or DD
 Long _____ " or 122.76083 DMS or DD
 Street Address of Well (or nearest address) COMMONS AREA NEAR PUMP STATION NEXT TO TENNIS COURTS

(10) STATIC WATER LEVEL

Existing Well/Predeepening	Date	SWL (psi)	+	SWL (ft)
Completed Well	<u>6-19-09</u>			<u>4</u>

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING ZONES Depth water was first found 10

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>6-18-09</u>	<u>10</u>	<u>18</u>	<u>20-7</u>			<u>4</u>

(11) WELL LOG Ground Elevation 2572 (SATELLITE)

Material	From	To
CLAY DARK BROWN STICKY w/ COBBLES	0	5
CLAY BROWN	5	7
CLAY GRAY	7	8
CLAY BROWN	8	9.5
GRAVEL ANGULAR MED. TO LARGE (or BRACCA)	9.5	16
GRAVEL SMALL	16	18
UNKNOWN VERY SOFT	18	19
CLAY RED	19	25
CLAY RED w/ GRAY ROCK CHIPS	25	30

Date Started 6-17-09 Completed 6-19-09

(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 _____ Date _____
 Signed _____

(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 796 Date 6-20-09
 Signed Paul K...
 Contact Info. (optional) _____

JACK 59206

STATE OF OREGON WATER SUPPLY WELL REPORT

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

WELL LABEL # L 95561

START CARD # 1007051

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

(1) LAND OWNER

Owner Well I.D. _____
 First Name _____ Last Name _____
 Company SUNBRIDGE ESTATES HOA
 Address 6556 HILLCREST RD
 City MEDFORD State OR Zip 97504

(2) TYPE OF WORK New Well Deepening Conversion
 Alteration (repair/recondition) Abandonment

(3) DRILL METHOD

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

(4) PROPOSED USE

Domestic Irrigation Community
 Industrial/Commercial Livestock Dewatering Injection
 Thermal Other PUBLIC USE

(5) BORE HOLE CONSTRUCTION Special Standard: Yes (attach copy)

Depth of Completed Well 26 ft.

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amount	Secs/lbs
10"	0	25	CONCRETE BEATONS PELLETS	16	18 1/2	100	#
6"	25	30	BENTONITE CHIPS	0	16	19 2/3	SAKCS

How was seal placed: Method A B C D E

Other POURED DRY

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

Filter pack from 13 ft. to 25 ft. Material PER GRAVEL Size 3/8

Explosives used: Yes Type _____ Amount _____

(6) CASING/LINER

Casing	Liner	Dia	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		6	1 1/2	18 1/2	.250	X			
	X	4	2 1/2	26	CL 160		X	X	

Shoe Inside Outside Other Location of shoe(s) _____

Temporary casing Yes Diameter 6" From 1 3/4 To 18 1/4

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type SLOTTED Material SCH 40 PVC

Perf	Scrn	Casing	Liner	Screen Dia	From	To	Screen slot width	Slot length	# of slots	Tele/pipe size
	X	X		4"	18	26	.020			

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

Pump Bailor Air Flowing Artesian

Yield gal/min 8.15 Drawdown _____ Drill stem/Pump depth 19 1/2 Duration (hr) 1hr 18 mins

Temperature 59 Lab analysis Yes

Water quality concerns? Yes (describe below)

From _____ To _____ Description _____ Units _____

From	To	Description	Units

(9) LOCATION OF WELL (legal description)

County JACKSON Twp 37S N or S Range 1E E or W W.M.
 Sec 25 SE 1/4 of the NE 1/4 Tax Lot 2300
 Tax Map Number _____ Lot _____

Lat _____ or 42.32550 DMS or DD
 Long _____ or 122.76083 DMS or DD

Street Address of Well (or nearest address) COMMONS AREA NEAR PUMP STATION NEXT TO TENNIS COURTS

(10) STATIC WATER LEVEL

	Date	SWL (psi)	SWL (ft)
Existing Well/Predeepening			
Completed Well	<u>6-19-09</u>		<u>4</u>

Flowing Artesian? Yes Dry Hole? Yes

WATER BEARING /ONES Depth water was first found 10

SWI Date	From	To	Est Flow	SWL (psi)	+ SWL (ft)
<u>6-18-09</u>	<u>10</u>	<u>18</u>	<u>20-7</u>		<u>4</u>

(11) WELL LOG

Ground Elevation 2572 (SATellite)

Material	From	To
CLAY DARK BROWN STICKY w/ COBBLES	0	5
CLAY BROWN	5	7
CLAY GREY	7	8
CLAY BROWN	8	9.5
GRAVEL ANGULAR MED. TO LARGE (or BRECCIA)	9.5	16
GRAVEL SMALL	16	18
UNKNOWN VERY SOFT	18	19
CLAY RED	19	25
CLAY RED w/ GRAY ROCK CHIPS	25	30

Date Started 6-17-09 Completed 6-19-09

(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 _____ Date _____

Signed _____

(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 796 Date 6-20-09

Signed [Signature]

Contact Info. (optional) _____

PIONEER DRILLING

JUN 6 6 2009

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

04-27-2011

WELL LABEL # L 46422

START CARD # 1013039

(1) LAND OWNER Owner Well I.D.

First Name Last Name
Company SUNRIDGE ESTATES HOMEOWNERS ASSOCIATION
Address 6556 HILLCREST RD.
City MEDFORD State OR Zip 97504

(2) TYPE OF WORK
New Well Deepening Conversion
Alteration (repair/recondition) Abandonment

(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

Table with columns: Dia, From, To, Material, From, To, Amt, Sacks/lbs. Includes Bore Hole and SEAL data.

How was seal placed: Method A B C D E
Other POURED BEN. DRY
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: Yes Type Amount

(6) CASING/LINER
Table with columns: Casing, Liner, Dia, From, To, Gauge, Stl, Plstc, Wld, Thrd

Shoe Inside Outside Other Location of shoe(s)
Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS

Table with columns: Perf/Sreen, Casing/Liner, Dia, From, To, Scm/slot width, Slot length, # of slots, Tele/pipe size

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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr)

Temperature 58 F Lab analysis Yes By
Water quality concerns? Yes (describe below)
Table with columns: From, To, Description, Amount, Units

(9) LOCATION OF WELL (legal description)

County Jackson Twp 37.00 S N/S Range 1.00 W E/W WM
Sec 25 SE 1/4 of the NE 1/4 Tax Lot 103
Tax Map Number Lot
Lat Long DMS or DD
Street address of well Nearest address

6430 PINE RIDGE DRIVE. MEDFORD,OR

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), SWL(ft). Includes Existing Well / Predeepening and Completed Well data.

Flowing Artesian? Dry Hole?

WATER BEARING ZONES Depth water was first found

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft)

(11) WELL LOG Ground Elevation

Table with columns: Material, From, To. Includes BASALT and UNKNOWN entries.

Date Started 04-19-2011 Completed 04-26-2011

(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.

License Number Date
Electronically Filed
Signed

(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.

License Number 1844 Date 04-27-2011
Electronically Filed
Signed COLTER CHANCELLOR (E-filed)
Contact Info (optional)

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.785)

JACK
 30270

AUG 9 1990

375/1E/19

(START CARD) # 17516

(1) OWNER: Well Number: 6 six
 Name Robert G. Robertson
 Address 710 Gardley
 City Medford, Oregon State _____ Zip 97504

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 340 ft.
 Yes No
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount	
Diameter	From	To	Material	From	To	sacks or pounds	
10"	0	38'	cement	0	38'	15 sacks	
6"	38'	340'					

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: 6"	+18"	38'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	-1	340'	.250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of sheets) 38'

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
240'	340'	6"	120	1/8"	4"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____
15 339' 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 strata: _____

(9) LOCATION OF WELL by legal description:
 County Jackson Latitude _____ Longitude _____
 Township 37S N or S. Range 1E E or W. WM.
 Section 19 1/4 _____ 1/4 _____
 Tax Lot 500 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Pine Ridge Drive

(10) STATIC WATER LEVEL:
80' ft. below land surface. Date 7-12-90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 280'

From	To	Estimated Flow Rate	SWL
280'	320'	15	80'

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
adobe	0	3	
clay, brown	3	14	
" , blue/grey	14	29	
claystone, grey	29	50	
" , brown/red	50	90	
" , grey	90	98	
" , brown	98	110	
" , brown/grey	110	120	
" , grey	120	130	
" , red	130	134	
" , grey	134	140	
" , red	140	160	
" , grey	160	170	
" , light brown	170	185	
" , grey, hard	185	240	
" , medium grey	240	280	
" , light grey	280	285	
" , blue grey	285	325	15
" , grey/green	325	340	

STUDEBAKER DRILLING, INC.
 1400 Arnold Lane
 Medford, Oregon 97501

Date started 7-16-90 Completed 7-17-90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed Frank R. Conner WWC Number _____ 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed John Studabak WWC Number 1077 Date 6/8/90

RECEIVED
 JUN 06 2012

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 837.765)

JACK 30218
 JUL 23 1990
 Amended

375/1E/19
 45488

WATER RESOURCES DEPT.
 OREGON (START CARD) #

(1) OWNER: Well Number 3 three
 Name Robert C. Robertson
 Address 710 Cardley Avenue
 City Medford State OR Zip 97504

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 304 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount
Diameter	From To	Material	From To	sacks or pounds
10"	0 35'	cement	0 35'	13 sacks
6"	35 304'			

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: 6"	+2	35'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	-1	304'	250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
140	304	6"	120	1/8"	4"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____
15 _____ 303' 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 strata: _____

(9) LOCATION OF WELL by legal description:
 County Jackson Latitude _____ Longitude _____
 Township 37E N or S, Range 1E E or W, W.M.
 Section 19 4 4
 Tax Lot 500 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____
Pine Ridge Drive, Medford, OR

(10) STATIC WATER LEVEL:
100 ft. below land surface. Date 6-22-90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 130'

From	To	Estimated Flow Rate	SWL
130	150	2	100
240	260	13	100

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
top soil, soft, brown	0	3	
clay, soft, brown	3	24	
claystone, grey/green	24	62	
" grey	62	80	
" brown	80	84	
" grey	84	86	
" brown	86	90	
" grey	90	110	
" light grey	110	130	
rock, hard, dark grey	130	150	100'
" brown	150	155	
" grey/green	155	165	
" grey	165	235	
" brown	235	270	
" grey	270	304	

STUDEBAKER DRILLING, INC.
 1400 Arnold Lane
 Medford, Oregon 97501

Date started 6-21-90 Completed 6-22-90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed Grant & Canada WWC Number 1432
 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed John Studenik WWC Number 679
 Date 7/20/80

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT

SECOND COPY - CONSTRUCTOR

THIRD COPY - CUSTOMER

OSOC 2/88

RECEIVED

JUN 6 2012

WATER RESOURCES DEPT
 SALEM, OREGON

JUL 23 1990

37S/1E/19

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.785)

WATER RESOURCES DEPT.

WELL LOCATION (START CARD) # 15180

Jack
30218

(1) OWNER:
Name Robert C. Robertson Well Number 3 three
Address 710 Cardley Avenue
City Medford State OR Zip 97504

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 304 ft.
Explosives used Yes No Type Amount

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
10"	0 35'	cement	0 35'	13 sacks	
6"	35 304'				

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: 6"	+2	35'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	-1	304'	250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method skill saw
 Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
140	304	6"	120	1/8"	4"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
15		303'	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 strata: _____

(9) LOCATION OF WELL by legal description:
County Jackson Latitude _____ Longitude _____
Township 37S N or S, Range 1E E or W, WM.
Section 19 4 4
Tax Lot 500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Pine Ridge Drive, Medford, OR

(10) STATIC WATER LEVEL:
100 ft. below land surface. Date 6-22-90
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 130'

From	To	Estimated Flow Rate	SWL
130	150	2	100
240	260	13	100

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
top soil, soft, brown	0	3	
clay, soft, brown	3	24	
claystone, grey/green	24	62	
" grey	62	80	
" brown	80	84	
" grey	84	86	
" brown	86	90	
" grey	90	110	
" light grey	110	130	
rock, hard, dark grey	130	150	100'
" " brown	150	155	
" " grey/green	155	165	
" " grey	165	235	
" " brown	235	270	
" " grey	270	304	

RECEIVED
STUDEBAKER DRILLING, INC.
1400 Arnold Lane
Medford, Oregon 97501
JUN 6 6 23:2
WATER RESOURCES DEPT
SALEM OREGON

Date started 6-21-90 Completed 6-22-90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed Grant M Canada WWC Number 1432
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 well construction standards. This report is true to the best of my knowledge and belief.
Signed John Studenik WWC Number 679
Date 7/20/90

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

JACK
30271

AUG 9 1990

375/1E/19

(START CARD) # 17518

(1) OWNER: Well Number: 8 eight

Name Robert C. Robertson
 Address 710 Cardley Avenue
 City Medford State OR Zip 97504

(2) TYPE OF WORK:

New Well Deepen Recundition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 170 ft.

Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	38'	cement	0	38'	15 sacks
6"	38'	170'				

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:

Casing	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
	6"	+18"	38'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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:	4"	-1	170	.250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method skill saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
90	170	6"	120	1/8"	4"	<input type="checkbox"/>	<input checked="" 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"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
6		169'	1 hr.

Temperature of water _____ 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 Jackson Latitude _____ Longitude _____
 Township 37S N or S. Range 1E E or W. WM. _____
 Section 19 1/4 _____ 1/4 _____
 Tax Lot 500 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Pine Ridge Drive

(10) STATIC WATER LEVEL:

90' ft. below land surface. Date 7-17-90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 110'

From	To	Estimated Flow Rate	SWL
110	120	6	90'

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
adobe, hard	0	6	
clay, hard, brown	6	25	
" , dark brown	25	34	
claystone, grey	34	45	
" , med grey	45	50	
" , red	50	70	
" , grey	70	80	
" , white/grey	80	100	
" , dark grey	100	110	
" , blue/grey	110	120	90'
rock, grey, hard	120	135	
" , dark grey	135	160	
" , very hard	160	170	

RECEIVED

JUN 6 6 2012

STUDEBAKER DRILLING, INC.
 1400 Arnold Lane
 Medford, Oregon 97501

WATER RESOURCES DEPT
 SALEM, OREGON

Date started 7-17-90 Completed 7-17-90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed Shank W Conner WWC Number _____ 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed John Studelaker WWC Number 677 Date 8/6/90

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.785)

JACK JACK 30273 AUG 9 1990

37S/1E/19

(START CARD) # 17517

(1) OWNER: Well Number: 7 seven

Name Robert C. Robertson
 Address 710 Gardley Avenue
 City Medford State OR Zip 97504

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 300' ft.
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	18'	cement	0	18'	7 sacks
6"	18	300'				

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:

Casing/Liner	Diameter	From	To	Gauge	Steel		Plastic		Welded		Threaded	
					XX				XX			
Casing	6"	+18"	18.5'	.250	XX				XX			
Liner	4"	-1	300'	.250			XX		XX			

Final location of shoes: _____

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

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
260	300	6"	180	1/8"	4"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 80 Drawdown _____ Drill stem at 299' Time 1 hr.

Temperature of water _____ Depth Ar _____
 Was a water analysis done? Yes By whom _____
 Did any strata contain water not suitable for intended use? Top little
 Salty Muddy Odor Colored Other _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County Jackson Latitude _____ Longitude _____
 Township 37S N or S. Range 1E E or W. WM. _____
 Section 19 1/4 1/4
 Tax Lot 500 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Pine Ridge Drive,

(10) STATIC WATER LEVEL:
100' ft. below land surface. Date 7-18-90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 58'

From	To	Estimated Flow Rate	SWL
58'	60	3	100'
262	280	77	100'

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
adobe	0	2	
clay, brown, hard	2	7	
rock, grey, hard	7	23	
claystone, red	23	27	
" , grey	27	35	
" , red/brown	35	44	
" , dark grey	44	58	
" , grey/green	58	60	80'
" , grey	60	101	
" , tan/red	101	109	
" , blue/grey	109	140	
" , red/brown	140	155	
" , grey/blue	155	160	
" , tan	160	205	
" , dark	205	210	
" , blue/grey	210	245	
" , light grey	245	262	
" , blue/grey	262	280	
" , grey	280	300	

STUDEBAKER DRILLING, INC.
 1400 Arnold Lane
 Medford, Oregon 97501

Date started 7-17-90 Completed 7-18-90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed John Studebaker WWC Number _____ 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed John Studebaker WWC Number 679 Date 8/6/90

For Official Use Only:

Received Date: _____ County Well Log ID # "JACK 30273" Well Identification Tag # 47382

47382

WELL IDENTIFICATION APPLICATION FORM

BUYER/CURRENT WELL OWNER:

Name: DAVID C. HARDER & DEBRA R. HARDER

Mailing Address: 728 Cherrywood Drive

City: Medford State: OR Zip: 97504 Phone: 541-776-7436 541-779-4893

NOTE: Well Identification Tag will be sent to the above address unless otherwise specified.

WELL LOCATION:

County: JACKSON Owner's Well Number (1" or 2nd, etc) 1

Township: 37 N or S (circle one), Range: 1 E or W (circle one), Section # 19

Quarter Quarter (NE, SE, NW, SW, etc.): W 1/2 1/4 1/4 Tax Lot Number: 300

Type of Well: water supply X monitoring 7182 Pine Ridge Drive, Medford, OR 97504

Street Address of Well (if different from above): Lot 29 - SunRidge Estate Subdivision - Phase III -

WELL INFORMATION: (Complete as many blanks as you can. Attach a copy of well log if available)

Start Card Number: 17517 Approx. Construction Date: 7-18-1990

Well Constructor: John Studelaker, Well Drilling

Name of Owner at Time of Construction: Bob Robertson DBA - SunRidge Estate

Well Depth (in feet): 300 Static Water Level (in feet): 100

Diameter of Exposed Well Casing (in inches): 6"

Does this well have a formal water right associated with it? Yes: X No: /

If Yes: Application #: Permit #: 000266-92 Certificate #:

Please Return Completed Form to:

Well Identification Program Oregon Water Resources Department 158 12th Street NE Salem, OR 97301-4172

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WATER RESOURCES DEPT SALEM OREGON

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WATER RESOURCES DEPT SALEM, OREGON

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JACK
30272

Amended

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

WELL I.D. # L
START CARD # 15180

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

(1) OWNER: Wayne Breeze Well Number _____
Name Wayne Breeze
Address 7159 Pine Ridge DR
City Medford State OR Zip 97504

(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 220 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Each or pounds
Diameter	From	To	Material	From	To	
10	0	33 1/2	Cement	0	33 1/2	13
6	33 1/2	220				

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: 6	1 1/2	33 1/2	1/4	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4	-1	220	1/4	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 33 1/2

(7) PERFORATIONS/SCREENS:

Perforations Method SKILL SAW
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele./pipe size	Casing	Liner
140	220	6"	120	1/8"	4"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min _____ Drawdowns _____ Drill stem at _____ Time _____
15 _____ 220 _____ 1 hr.

Temperature of water 58 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 Jacks Latitude _____ Longitude _____
Township 37 N or S Range 1 E or W. WM.
Section 19 NW 1/4 SW 1/4
Tax Lot 1100 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 7159 Pine Ridge Medford OR 97504

(10) STATIC WATER LEVEL:
140 ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 130

From	To	Estimated Flow Rate	SWL
130	160	15	190

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Top Soil	Bed	0	3
clay silt	Bed	3	24
claystone	Gr/ls	24	62
	Gr	62	130
claystone	harder clay	130	150
	Bed	150	155
	Gr	155	220

Date started 6-16-90 Completed 6-17-90
(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.
Drilled by Frank Canale WWC Number 1432
Signed by John Studahl 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.
Signed John Studahl WWC Number 679 Date 7/20/90

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

JACK
 30272

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378/1E/19

(START CARD) # 15180

(1) OWNER: Well Number: 4 FOUR
 Name Robert C. Robertson
 Address 710 Cardley Avenue
 City Medford State OR Zip 97504

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 220 ft.
 Explosives used Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	38'	cement	0	38'	12 sacks
6"	38'	220'				

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:	6"	+18"	38'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	-1	220'	.250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of sheets: _____

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

From	To	Slot size	Number	Diameter	Telo/pipe size	Casing	Liner
140	220	6"	120	1/8"	4"	<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
 Yield gal/min 15 Drawdown _____ Drill stem at 220' Time 1 hr.

Temperature of water _____ 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 Jackson Latitude _____ Longitude _____
 Township 37S N or S. Range 1E E or W. WM. _____
 Section 19 1/4 _____ 1/4 _____
 Tax Lot 500 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Pine Ridge Drive, Medford

(10) STATIC WATER LEVEL:
100' ft. below land surface. Date 7-12-90
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 190'

From	To	Estimated Flow Rate	SWL
190'	210'	15	100'

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
top soil, adobe	0	2	
clay, hard, brown	2	7	
" , soft, brown	7	21	
" , yellow, brown	21	32	
claystone, grey	32	42	
" , blue grey	42	79	
" , brown	79	93	
" , grey	93	120	
" , red	120	152	
" , grey	152	190	
" , dark grey	190	210	100
" , light grey	210	220	

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STUDEBAKER DRILLING, INC. WATER RESOURCES DEPT
 1400 Arnold Lane SALEM, OREGON
 Medford, Oregon 97501

Date started 7-11-90 Completed 7-12-90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed John M. Conover WWC Number _____ 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed John Studenaker WWC Number 478 Date 6/6/90

Jack 51242

TAG# L-15035

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

MEDINA WELL DRILLING INC. (START CARD) # 94235

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

(1) OWNER: Well Number _____

Name WAYNE BREEZE
Address 7159 PINKRIDGE DRIVE
City MEDFORD State OR Zip 97504

(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 340 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	19	CEMENT	0	19	5SACKS
6"	19	340				

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:	6"	+1	19	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	0	340	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 19

(7) PERFORATIONS/SCREENS:

Perforations Method SAW
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
240	340	1/8" X 8	100			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
30 GPM		340	1 hr.

Temperature of water 58 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 _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County JACKSON Latitude _____ Longitude _____
Township 37S N or S Range 1E E or W. WM.
Section 19C SW 1/4 NE 1/4
Tax Lot 900 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) SAME AS #1

(10) STATIC WATER LEVEL:
194 ft. below land surface. Date 7-8-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 315

From	To	Estimated Flow Rate	SWL
315	325	30 GPM	194

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
SOIL, BROWN	0	1	
CLAY, BROWN	1	8	
BASALT, BROWN/GREY MEDIUM	8	42	
BASALT, GREY, TUFF SEAMS	42	69	
CINDERS, RED	69	73	
BASALT, GREY/REDISH	73	90	
BASALT, GREY, BROWN SEAMS	90	225	
CLAYSTONE, GREY, SOFT STICKY	225	264	
TUFF, GREY	264	298	
BASALT, GREY, REDISH/BROWN	298	340	194

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Medina Well Drilling, Inc.
(541) 664-6339
3286 Hanley Road
Central Point, OR 97502
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 7-8-97 Completed 7-8-97
(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.

Signed _____ Date _____
WWC Number _____

(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.

Signed Joachim Medina WWC Number 1207
Date 7-8-97

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

WELL I.D. # L 69019
 START CARD # 166532

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

(1) **LAND OWNER** Well Number _____
 Name WAYNE BREEZE
 Address 7159 PINERIDGE DR.
 City MEDFORD State OR. Zip 97504

(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 154 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	54	CEMENT	0	54	14 SACKS
6"	54	160				

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: 6"	+1	68	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	0	154	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) 68

(7) **PERFORATIONS/SCREENS:**
 Perforations Method SAW / PERFORATOR
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
56	64	1/4 x 4	50	50		<input checked="" type="checkbox"/>	<input type="checkbox"/>
94	154	1/8 x 8	60	60		<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
15GPM		154	1 hr.

Pump Bailer Air Flowing Artesian

Temperature of water 60 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 JACKSON Latitude _____ Longitude _____
 Township 37S N or S Range 1E E or W. WM.
 Section 19 SW 1/4 SW 1/4
 Tax Lot 900 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 7159 PINERIDGE DRIVE, MEDFORD

(10) **STATIC WATER LEVEL:**
38 ft. below land surface. Date 6-16-04
 Artesian pressure _____ lb. per square inch Date _____

(11) **WATER BEARING ZONES:**
 Depth at which water was first found 57

From	To	Estimated Flow Rate	SWL
57	74	15 GPM	38

(12) **WELL LOG:**
 Ground Elevation _____

Material	From	To	SWL
SOIL, BROWN, STICKY	0	3	
CLAY, BROWN	3	13	
CLAYSTONE, BROWN	13	41	
CLAYSTONE, GRAY/BRN	41	78	
CLAYSTONE, BROWN	78	80	
CLAYSTONE, GRAY	80	149	
CLAYSTONE, RED			
VERY SOFT, CAVIE	149	160	38

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 JUN 06 2004
 WATER RESOURCES DEPT SALEM OREGON

Date started 6-15-04 Completed 6-16-04

(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.
 Signed Medina Well Drilling, Inc WWC Number _____
 (541) 664-6339 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.
 Signed Joaquin Medina Jr WWC Number 1207
 3286 Foster Road Central Point, OR 97502 Date 6-16-04

STATE OF OREGON
WATER SUPPLY WELL REPORT
 (as required by ORS 837.768)

JACK 54522

JACK
 54522

WELL ID # L L47285

(START CARD) # 138802

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

(1) OWNER:

Well Number: _____

Name Dave Harder

Address 728 Cherrystone drive

City Medford

State OR Zip 97504

(2) TYPE OF WORK:

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger

Other pump hole

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well _____ ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	feet	pounds

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) CASTING LINER:

Casing	Diameter	From To	Gauge	Material			
				Steel	Plastic	Welded	Threaded

Final location of sheet(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tubing size	Casing	Liner

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

Pump Seiler Air Flowing Artesian

Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____

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 strata: _____

(9) LOCATION OF WELL by legal description:

County Jackson Latitude _____ Longitude _____
 Township 37E N or S. Range 1W E or W. of W.M.
 Section 25 NE 14 NE 14
 Tax lot 300 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Sunridge
Estates-Hillcrest

(10) STATIC WATER LEVEL:

ft. below land surface _____ Date _____
 Artesian pressure _____ ft. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Material	Ground elevation		From	To	SWL
removed 706 feet of 4 inch pvc liner from 8 inch well so that the water resources dept. could run a camera down the well.					

ASHLAND DRILLING INC
ALL AMERICAN PUMP CO
 600 South Pacific Hwy.
 Talent, OR 97540
 (541) 455-2527

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MAY 18 2001

WATER RESOURCES DEPT
 SALEM, OREGON

Date started 4/28/2001 Completed 4/28/2001

(Bonded) 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.

Signed W. J. ... WWC Number 1657
 Date 5/11/2001
 Ashland Drilling Inc.

(Bonded) Water Well Constructor Certification:

I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction class reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to my best knowledge and belief.

Signed ... WWC Number 1678
 Date 5/11/2001
 Ashland Drilling Inc.

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WATER RESOURCES DEPT
 SALEM OREGON

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

Jack
57454

WELL I.D. # L 76740

START CARD # 173186

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

(1) LAND OWNER Well Number 173186
Name Dave West Trustee/Sun Ridge Estates
Address 7012 Pine Ridge Dr
City Medford State OR Zip 97504

(2) TYPE OF WORK New Well
 Deepening Alteration (repair/recondition) Abandonment Conversion

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable Auger Cable Mud
 Other

(4) PROPOSED USE
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 620' ft.
Explosives used: Yes No Type Amount

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
10"	0'	18'	Bentonite	0'	18'	10 Sacks
6"	18'	620'				

How was seal placed: Method A B C D E
 Other Bentonite Dry Poured
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from 6' ft. to 620' ft. Size of gravel Pea Gravel

Diameter	From	To	Gauge	SEAL			
				Steel	Plastic	Welded	Threaded
Casing: 6"	+1'	19'	.280	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	-1'	620'	sch 40	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 19'

(7) PERFORATIONS/SCREENS
 Perforations Method Sawn
 Screens Type Material

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
600'	620'	1/4x4	120			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
3 GPM		620'	1 Hr

Temperature of water 54 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 (legal description)
County Jackson
Tax Lot 160 Lot _____
Township 37 S Range 1 E WM
Section 19 1/4

Lat 42 ° 19 ' 945" or _____ (degrees or decimal)
Long 122 ° 45 ' 342" or _____ (degrees or decimal)

Street Address of Well (or nearest address) 7012 Pine Ridge Dr
Medford, OR

(10) STATIC WATER LEVEL
158' ft. below land surface. Date 6/4/05
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES		Estimated Flow Rate	SWL
From	To		
554'	557'	3 GPM	158'

(12) WELL LOG		Ground Elevation		SWL
Material	From	To		
Brown Clay & Cobble	0'	5'		
Basalt	5'	189'		
Brown Claystone	189'	195'		
Grey Claystone	195'	258'		
Brown Claystone	258'	271'		
Grey Claystone	271'	340'		
Grey & Brown Claystone	340'	480'		
Dark Grey Claystone	480'	620'		158'

Date Started 6/1/05 Completed 6/3/05

(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.

WWC Number _____ Date _____

Signed _____

(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.

WWC Number 1504 Date 6/5/05

Signed Charlie Hill Choulsen Drilling

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SALEM, OREGON

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SALEM OREGON