Approved: Tony Janicek

Digitally signed by Tony Janicek
DN: OU=Dam Safety Program, O=Oregon Water Resources Department, CN=Tony Janicek, E=Tony.M.Janicek@water.oregon.gov
Reason: I am approving this document
Location:
Date: 2026.06.30 16:54:20-07'00'
Foxit PDF Editor Version: 12.1.9

MEMO

To: Tony Janicek, Interim Well Construction Section Manager

From: Tommy Laird, Well Construction Compliance Coordinator

Subject: Review of Water Right Application G-19539

Date: June 30, 2026

The attached application was forwarded to the Well Construction Section by the Groundwater Section. Grayson Fish reviewed the application. Please see Grayson's Groundwater Review and the Well Report.

Applicant's Well #1 (JACK 30005): Based on a review of the Well Report, Well #1 seems to protect the groundwater resource.

The construction of Well #1 may not satisfy hydraulic connection issues to surface water.

STATE OF OREGON

WATER WELL REPORT

(as required by ORS 537.765)

APR 16 1990

JACK 30005

WATER RESOURCES DEPT. SALEM, OREGON

30005 JACK 39S/4W/7

(START CARD) # 17584

(1) OWNER:

Well Number:

Name BOB ANGELINI

Address 60000 THOMPSON CR RD

City APPLEGATE State OR Zip 97530

(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 143 ft.

Explosives used Yes ☐ No ☒ Type Amount

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
10	0	38	CEMENT	0	37	9 SACKS
						30# BENT
6	38	143				

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	38	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4	-5	143	C/16	☐	☒	☒	☐
					☐	☐	☐	☐

Final location of shoe(s) 38 FT

(7) PERFORATIONS/SCREENS:

☒ Perforations Method SAW

☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
64	143	4-6"	156	1/8		☐	☒
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
48		143	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 39S N or S, Range 4W E or W, WM.

Section 7 ¼ ¼

Tax Lot 900 Lot Block Subdivision

Street Address of Well (or nearest address)

60000 THOMPSON CR RD

(10) STATIC WATER LEVEL:

19 ft. below land surface. Date 4-11-90

Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 56

From	To	Estimated Flow Rate	SWL
56	56	1	
79	79	7	
87	87	5	
98	98	27	

(12) WELL LOG: 114-123 Ground elevation 8

Material	From	To	SWL
SOIL BROWN	0	1	
BASALT GREY BROKEN	1		
WITH BROWN CLAY		13	
CLAY BROWN WITH SMALL	13		
ANGULAR PEBBLES		17	
BASALT GREEN BROKEN	17		
WITH BROWN SILT		32	
BASALT GREEN WEATHERED	32		
SILTY CREVICE AT 56		66	
BASALT GREEN	66		
CREVICE AT 79			
WEATHERED AT 87			
CREVICE AT 98		114	
BASALT BLACK BROKEN	114	143	

Date started 4-9-90 Completed 4-11-90

(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.

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 well construction standards. This report is true to the best of my knowledge and belief. PIONEER DRILLING WWC Number 796

Signed Date 4-11-90

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER 9809C 3/88

Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.oregon.gov/owrd

Application for
Well ID Number

RECEIVED
JUL 1 2022
OWRD

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name *(please print)*: G. Robert and Diana G. Angelini

Mailing Address: 6000 Thompson Creek Road

City, State, Zip: Applegate, OR 97530

Mail Well ID to: ☒ SAME AS ABOVE ☐ In Care Of (C/O)

Name & Address: _____

City, State, Zip: _____

II. WELL LOCATION INFORMATION *(Please fill out as completely as possible)*

Township: 39 South (North / South) Range: 4 West (East / West) Section: 7 NW 1/4 of the SW 1/4

Tax Lot (usually last 3-5 numbers of Tax Map #): 900 County Jackson

GPS Coordinates: Lat 42d 11' 27.7" Long 123d 13' 39.2"

Street Address of Well, City: 6000 Thompson Creek Road, Applegate, OR 97530

If the property had a different street address in the past: none

III. GENERAL WELL INFORMATION *(Please fill out as completely as possible, AND attach copy of Well Report, if available)*

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Domestic, proposed emergency drought Irr.

Date Well Constructed (or property built): 4/11/1990 Total Well Depth: 143' Casing Diameter: 6"

Owner at time the well was constructed (if known): Angelini Well Report # (if known): Jack 30005

Other Information: _____

SUBMITTED BY *(please print)*: Harold L. Center, PLS, CWRE

PHONE: 541-535-6108 **EMAIL &/or FAX:** center1071@gmail.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301. Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:	Well Report Number:	Well Identification #:
7-1-22	JACK 30005	L-146938