Water Right Conditions Tracking Slip

Groundwater/Hydrology Section

FILE # # G-17169

ROUTED TO: WR's

TOWNSHIP/
RANGE-SECTION: 36S/1W-2

CONDITIONS ATTACHED?: [X] yes [ ] no

REMARKS OR FURTHER INSTRUCTIONS:

Reviewer: Donn Miller

WATER RESOURCES DEPARTMENT

MEMO

March 18, 2009

TO: Application G- 17169

FROM: GW: Donn Miller
(Reviewer's Name)

SUBJECT: **Scenic Waterway Interference Evaluation**

__X__ YES
The source of appropriation is within or above a Scenic Waterway
_____ NO

__X__ YES
Use the Scenic Waterway condition (Condition 7J)
_____ NO

_____ Per ORS 390.835, the Ground Water Section is **able** to calculate ground water interference with surface water that contributes to a Scenic Waterway. The calculated interference is distributed below.

__X__ Per ORS 390.835, the Ground Water Section is **unable** to calculate ground water interference with surface water that contributes to a scenic waterway; **therefore, the Department is unable to find that there is a preponderance of evidence that the proposed use will measurably reduce the surface water flows necessary to maintain the free-flowing character of a scenic waterway.**

DISTRIBUTION OF INTERFERENCE

Calculate the percentage of consumptive use by month and fill in the table below. If interference cannot be calculated, per criteria in 390.835, do not fill in the table but check the "unable" option above, thus informing Water Rights that the Department is unable to make a Preponderance of Evidence finding.

Exercise of this permit is calculated to reduce monthly flows in _____ Scenic Waterway by the following amounts expressed as a proportion of the consumptive use by which surface water flow is reduced.

Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec

PUBLIC INTEREST REVIEW FOR GROUND WATER APPLICATIONS

TO: Water Rights Section Date **3/18/2009**

FROM: Ground Water/Hydrology Section **Donn Miller**
Reviewer's Name

SUBJECT: Application G- **17169** Supersedes review of **none**
Date of Review(s)

PUBLIC INTEREST PRESUMPTION; GROUNDWATER

OAR 690-310-130 (1) *The Department shall presume that a proposed groundwater use will ensure the preservation of the public welfare, safety and health as described in ORS 537.525.* Department staff review ground water applications under OAR 690-310-140 to determine whether the presumption is established. OAR 690-310-140 allows the proposed use be modified or conditioned to meet the presumption criteria. **This review is based upon available information and agency policies in place at the time of evaluation.**

A. GENERAL INFORMATION: Applicant's Name: **Brad Lind** County: **Jackson**

A1. Applicant(s) seek(s) **0.0212** cfs from **one** well(s) in the **Rogue** Basin, **Little Butte Creek** subbasin Quad Map: **Eagle Point**

A2. Proposed use: **nursery, irrigation on 1 acre** Seasonality: **3/1 to 10/31, year round for nursery**

A3. Well and aquifer data **(attach and number logs for existing wells; mark proposed wells as such under logid)**:

Well	Logid	Applicant's Well #	Proposed Aquifer*	Proposed Rate(cfs)	Location (T/R-S QQ-Q)	Location, metes and bounds, e.g. 2250' N, 1200' E fr NW cor S 36
1	**Jack 57820**	**1**	**claystone**	**0.0202**	**36S/1W-2 NW-SE**	**338'S, 499'E fr center ¼ cor S 2**
2						
3						
4						
5						

* Alluvium, CRB, Bedrock

Well	Well Elev ft msl	First Water ft bls	SWL ft bls	SWL Date	Well Depth (ft)	Seal Interval (ft)	Casing Intervals (ft)	Liner Intervals (ft)	Perforations Or Screens (ft)	Well Yield (gpm)	Draw Down (ft)	Test Type
1	**1485**	**50**	**30**	**12/12/05**	**165**	**0-24**	**0-42**	**0-165**	**40-165**	**45**	**---**	**B**

Use data from application for proposed wells.

A4. **Comments: The well develops water from the Colestin Formation which is described as water-deposited tuffs and conglomerates with a few interbedded volcanic flows. Claystone, sandstone, and conglomerate are common driller descriptions. Claystone aquifer is extremely common in section 2 wells. Yields on logs are variable (0-100 gpm) and there are several deepenings.**

A5. ☐ **Provisions of the Rogue** Basin rules relative to the development, classification and/or management of ground water hydraulically connected to surface water ☐ **are**, *or* ☒ **are not**, activated by this application. (Not all basin rules contain such provisions.)
Comments: **NA**

A6. ☐ **Well(s) #** _____, _____, _____, _____, _____, tap(s) an aquifer limited by an administrative restriction.
Name of administrative area: _____
Comments: **NA**

B. GROUND WATER AVAILABILITY CONSIDERATIONS, OAR 690-310-130, 400-010, 410-0070

B1. **Based upon available data**, I have determined that ground water* for the proposed use:

a. ☐ **is** over appropriated, ☐ **is not** over appropriated, *or* ☒ **cannot be determined to be** over appropriated during any period of the proposed use. * This finding is limited to the ground water portion of the over-appropriation determination as prescribed in OAR 690-310-130;

b. ☐ **will not** *or* ☐ **will** likely be available in the amounts requested without injury to prior water rights. * This finding is limited to the ground water portion of the injury determination as prescribed in OAR 690-310-130;

c. ☐ **will not** *or* ☐ **will** likely to be available within the capacity of the ground water resource; or

d. ☒ **will, if properly conditioned**, avoid injury to existing ground water rights or to the ground water resource:
   i. ☒ The permit should contain condition #(s) **7C, 7F**;
   ii. ☐ The permit should be conditioned as indicated in item 2 below.
   iii. ☐ The permit should contain special condition(s) as indicated in item 3 below;

B2. a. ☐ **Condition** to allow ground water production from no deeper than _____ ft. below land surface;

b. ☐ **Condition** to allow ground water production from no shallower than _____ ft. below land surface;

c. ☐ **Condition** to allow ground water production only from the _____ ground water reservoir between approximately_____ ft. and_____ ft. below land surface;

d. ☐ **Well reconstruction** is necessary to accomplish one or more of the above conditions. The problems that are likely to occur with this use and without reconstructing are cited below. Without reconstruction, I recommend withholding issuance of the permit until evidence of well reconstruction is filed with the Department and approved by the Ground Water Section.

Describe injury –as related to water availability– that is likely to occur without well reconstruction (interference w/ senior water rights, not within the capacity of the resource, etc): _____

B3. **Ground water availability remarks: There is limited observation well data in this area. A well in section 1 that is also completed in claystone gives something information. The SWL's are typically about 20 feet along Stevens Road. Upland wells have deeper SWL's. The storage is probably pretty low in the claystone aquifer so I suspect that the seasonable changes with use can easily be 20+ feet. Water-bearing zones are identified as only a few feet thick. The application doesn't seek much water. I am still concerned that the use could produce problems for close neighbors with well interference and seasonal depletion being the main factors. The hydraulics of others wells is not at all clear since there may large drawdown demands to produce domestic water. Condition 7C sets decline and interference limits but I'm not sure that water level measurement annually in March can show more long-term trends on the annual peaks. In any case, the condition still provides a foothold for regulation based on seasonal conflicts.**

C. GROUND WATER/SURFACE WATER CONSIDERATIONS, OAR 690-09-040

C1. **690-09-040 (1):** Evaluation of aquifer confinement:

Well	Aquifer or Proposed Aquifer	Confined	Unconfined
1	**claystone**	☒	☐
		☐	☐
		☐	☐
		☐	☐
		☐	☐

Basis for aquifer confinement evaluation: **JACK 57820 and neighboring well logs**

C2. **690-09-040 (2) (3):** Evaluation of distance to, and hydraulic connection with, surface water sources. All wells located a horizontal distance less than ¼ mile from a surface water source that produce water from an unconfined aquifer shall be assumed to be hydraulically connected to the surface water source. Include in this table any streams located beyond one mile that are evaluated for PSI.

Well	SW #	Surface Water Name	GW Elev ft msl	SW Elev ft msl	Distance (ft)	Hydraulically Connected? YES	NO	ASSUMED	Potential for Subst. Interfer. Assumed? YES	NO
1	**1**	**Unnamed drainage to west**	**1453**	**1440**	**1500**	☒	☐	☐	☐	☒
1	**2**	**Unnamed drainage to east**	**1453**	**1453**	**4200**	☒	☐	☐	☐	☒
1	**3**	**Little Butte Creek**	**1453**	**1310**	**3200**	☐	☒	☐	☐	☒
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐
						☐	☐	☐	☐	☐

Basis for aquifer hydraulic connection evaluation: **The water-bearing zones in the claystone are very deep and the nearby creeks are usually dry. The unnamed drainages are ephemeral and it makes some sense to conclude a winter connection, for the proposed year round use, when aquifer and stream heads are similar. Those estimated locations provide the distance measure. The connection to Little Butte Creek is probably through these drainages since the well is in a saddle that straddles them.**

Water Availability Basin the well(s) are located within: **Little Butte Creek>Rogue R – at mouth**

C3a. **690-09-040 (4):** Evaluation of stream impacts for each well that has been determined or assumed to be **hydraulically connected and less than 1 mile** from a surface water source. Limit evaluation to instream rights and minimum stream flows that are pertinent to that surface water source, and not lower SW sources to which the stream under evaluation is tributary. Compare the requested rate against the 1% of 80% *natural* flow for the pertinent Water Availability Basin (WAB). If Q is not distributed by well, use full rate for each well. Any checked ☒ box indicates the well is assumed to have the potential to cause PSI.

Well	SW #	Well < ¼ mile?	Qw > 5 cfs?	Instream Water Right ID	Instream Water Right Q (cfs)	Qw > 1% ISWR?	80% Natural Flow (cfs)	Qw > 1% of 80% Natural Flow?	Interference @ 30 days (%)	Potential for Subst. Interfer. Assumed?
1	**1**	☐	☐	---	---	☐	**23.3-297**	☐	**<1%**	☐
1	**2**	☐	☐	---	---	☐	**23.3-297**	☐	**<1%**	☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐
		☐	☐			☐		☐		☐

Application G-___17169_____continued Date_____3/18/2009_____

C3b. **690-09-040 (4):** Evaluation of stream impacts <u>by total appropriation</u> for all wells determined or assumed to be **hydraulically connected and less than 1 mile** from a surface water source. **Complete only if Q is distributed among wells**. Otherwise same evaluation and limitations apply as in C3a above.

	SW #		Qw > 5 cfs?	Instream Water Right ID	Instream Water Right Q (cfs)	Qw > 1% ISWR?	80% Natural Flow (cfs)	Qw > 1% of 80% Natural Flow?	Interference @ 30 days (%)	Potential for Subst. Interfer. Assumed?
			☐			☐		☐		☐
			☐			☐		☐		☐
			☐			☐		☐		☐
			☐			☐		☐		☐

Comments: NA

C4a. **690-09-040 (5):** Estimated impacts on **hydraulically connected surface water sources greater than one mile** as a percentage of the proposed pumping rate. Limit evaluation to the effects that will occur up to one year after pumping begins. This table encompasses the considerations required by 09-040 (5)(a), (b), (c) and (d), which are not included on this form. Use additional sheets if calculated flows from more than one WAB are required.

Non-Distributed Wells													
Well	SW#	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
NA		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
Distributed Wells													
Well	SW#	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
		%	%	%	%	%	%	%	%	%	%	%	%
Well Q as CFS													
Interference CFS													
(A) = Total Interf.													
(B) = 80 % Nat. Q													
(C) = 1 % Nat. Q													
(D) = (A) > (C)		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
(E) = (A / B) x 100		%	%	%	%	%	%	%	%	%	%	%	%

(A) = total interference as CFS; (B) = WAB calculated natural flow at 80% exceed. as CFS; (C) = 1% of calculated natural flow at 80% exceed. as CFS; (D) = highlight the checkmark for each month where (A) is greater than (C); (E) = total interference divided by 80% flow as percentage.

Basis for impact evaluation: NA

C4b. **690-09-040 (5) (b) The potential to impair or detrimentally affect the public interest is to be determined by the Water Rights Section.**

C5. ☐ **If properly conditioned**, the surface water source(s) can be adequately protected from interference, and/or ground water use under this permit can be regulated if it is found to substantially interfere with surface water:

i. ☐ The permit should contain condition #(s)_____;

ii. ☐ The permit should contain special condition(s) as indicated in "Remarks" below;

C6. **SW / GW Remarks and Conditions** **The connection with surface water appears seasonal. The unnamed drainage to the east and west are ephemeral and carry flow during winter runoff periods. During the winter, the aquifer recharges up to near surface levels. At such times, there is a hydraulic connection between the well and the drainages that are flowing water. These episodes are the focus of consideration for stream depletion. It seems to me that, for the most part, ground water discharges very slowly to the drainages. The discharge may be commonly intercepted by plants in the low areas. Pumping by wells increases the seasonal depletion. The winter recharge potential then takes a little longer to fill up the aquifer before devoting itself to surface flow.**

If the winter water level in the well is less than 30 feet on the log, the depletion calculations at the unnamed drainages don't change much. The point of common head at the identified drainage doesn't get much closer.

References Used: **Well Reports, USGS Atlas HA-392, Availability and Quality of Ground Water in the Medford Area (1971), WRD Water availability tables**

D. WELL CONSTRUCTION, OAR 690-200

D1. **Well #:** _____ **Logid:** _____

D2. **THE WELL does not meet current well construction standards based upon:**

a. ☐ review of the well log;
b. ☐ field inspection by _____;
c. ☐ report of CWRE _____;
d. ☐ other: (specify) _____

D3. **THE WELL construction deficiency**:

a. ☐ constitutes a health threat under Division 200 rules;
b. ☐ commingles water from more than one ground water reservoir;
c. ☐ permits the loss of artesian head;
d. ☐ permits the de-watering of one or more ground water reservoirs;
e. ☐ other: (specify) _____

D4. **THE WELL construction deficiency is described as follows:** _____

D5. **THE WELL**

a. ☐ **was**, *or* ☐ **was not** constructed according to the standards in effect at the time of original construction or most recent modification.

b. ☐ I don't know if it met standards at the time of construction.

D6. ☐ **Route to the Enforcement Section.** I recommend withholding issuance of the permit until evidence of well reconstruction is filed with the Department and approved by the Enforcement Section and the Ground Water Section.

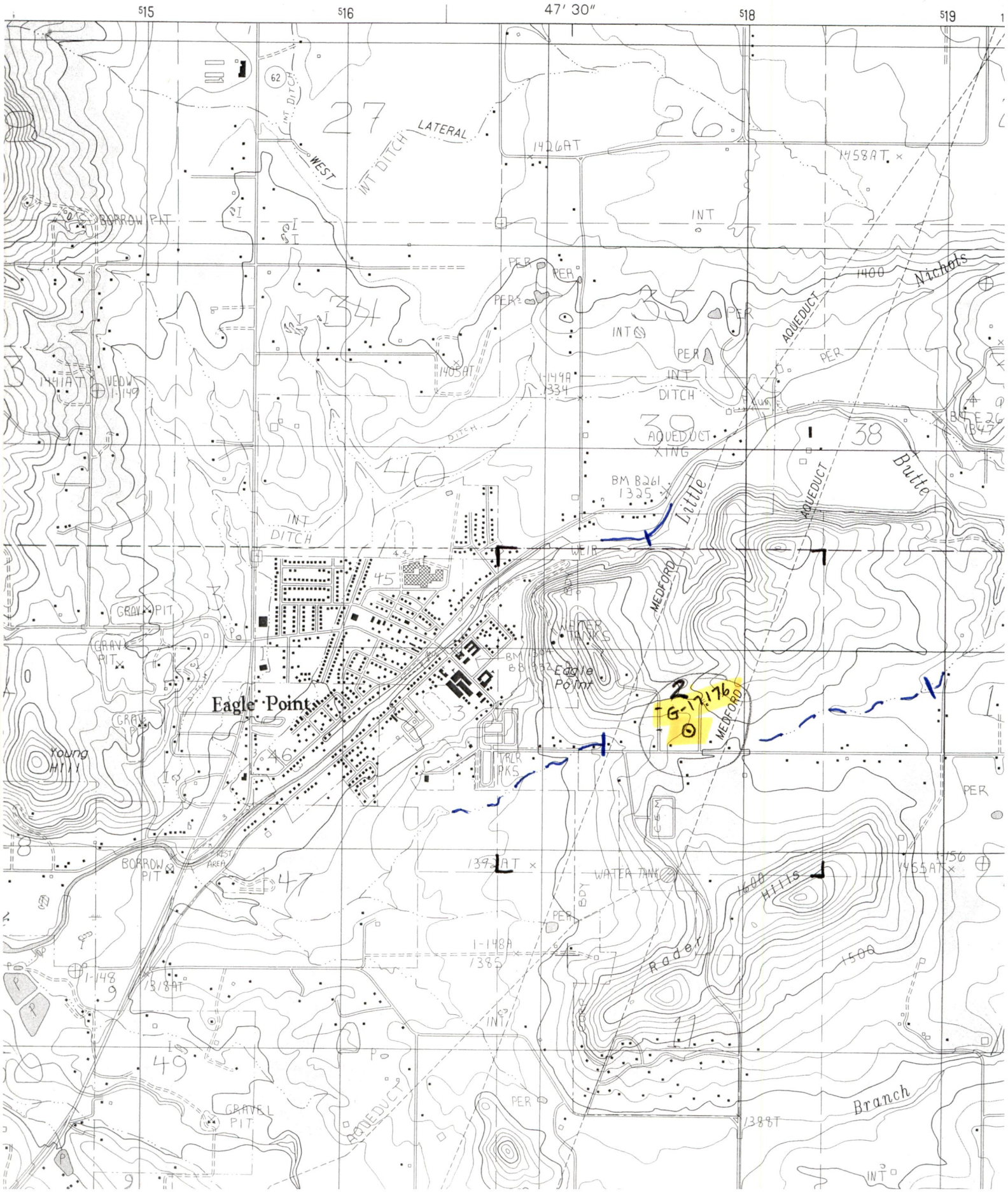
THIS SECTION TO BE COMPLETED BY ENFORCEMENT PERSONNEL

D7. ☐ Well construction deficiency has been corrected by the following actions: _____

_____ _____, 200____.
(Enforcement Section Signature)

D8. ☐ **Route to Water Rights Section (attach well reconstruction logs to this page).**

EAGLE
OREG
7.5 MINUTE



Water Availability Analysis
Detailed Reports

LITTLE BUTTE CR > ROGUE R - AT MOUTH
ROGUE BASIN
Water Availability as of 3/18/2009

Watershed ID #: 263
Date: 3/18/2009

Exceedance Level: 80%
Time: 8:40 AM

Water Availability Calculation | Consumptive Uses and Storages | Instream Flow Requirements | Reservations | Water Rights | Watershed Characteristics

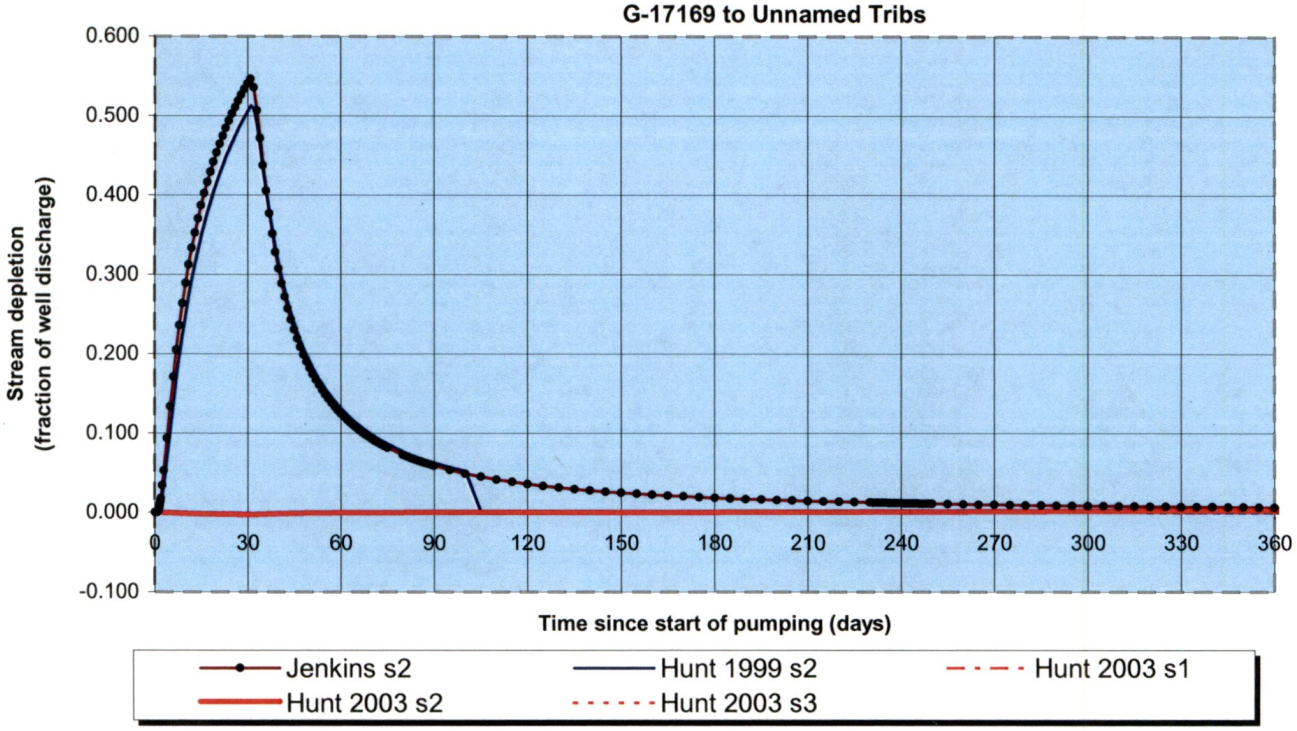
Water Availability Calculation

Monthly Streamflows in Cubic Feet per Second
Storage at 50% Exceedance in Acre-Feet

Month	Natural Stream Flow	Consumptive Uses and Storages	Expected Stream Flow	Reserved Stream Flow	Instream Flow Requirement	Net Water Available
JAN	133.00	47.30	85.70	0.00	100.00	-14.30
FEB	206.00	56.80	149.00	0.00	100.00	49.20
MAR	236.00	60.40	176.00	0.00	100.00	75.60
APR	297.00	19.80	277.00	0.00	100.00	177.00
MAY	141.00	32.70	108.00	0.00	60.00	48.30
JUN	82.50	48.90	33.60	0.00	20.00	13.60
JUL	73.90	69.90	4.00	0.00	20.00	-16.00
AUG	70.70	56.70	14.00	0.00	20.00	-6.00
SEP	45.90	35.40	10.50	0.00	120.00	-109.00
OCT	23.30	12.00	11.30	0.00	120.00	-109.00
NOV	34.40	22.10	12.30	0.00	100.00	-87.70
DEC	60.80	39.40	21.40	0.00	100.00	-78.60
STO	153,000.00	30,300.00	122,000.00	0.00	57,800.00	82,200.00

Download Data (Text - Formatted , Text - Tab Delimited , Excel)

Transient Stream Depletion (Jenkins, 1970; Hunt, 1999, 2003)



Output for Stream Depletion, Scenerio 2 (s2):						Time pump on (pumping duration) = 30 days						
Days	30	60	90	120	150	180	210	240	270	300	330	360
J SD	54.0%	12.5%	5.9%	3.6%	2.5%	1.8%	1.4%	1.2%	1.0%	0.8%	0.7%	0.6%
H SD 1999	50.6%	13.1%	6.2%	#######	#######	#######	#######	#######	#######	#######	#######	#######
H SD 2003	-0.27%	-0.05%	-0.01%	0.00%	0.01%	0.03%	0.05%	0.08%	0.12%	0.16%	0.21%	0.25%
Qw, cfs	0.021	0.021	0.021	0.021	0.021	0.021	0.021	0.021	0.021	0.021	0.021	0.021
H SD 99, cfs	0.011	0.003	0.001	#######	#######	#######	#######	#######	#######	#######	#######	#######
H SD 03, cfs	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000	0.000

Parameters:		Scenario 1	Scenario 2	Scenario 3	Units
Net steady pumping rate of well	Qw	0.02	0.02	0.02	cfs
Time pump on (pumping duration)	tpon	30	30	30	days
Perpendicular from well to stream	a	1500	1500	4200	ft
Well depth	d	165	165	165	ft
Aquifer hydraulic conductivity	K	20	20	20	ft/day
Aquifer saturated thickness	b	5	5	5	ft
Aquifer transmissivity	T	100	100	100	ft*ft/day
Aquifer storativity or specific yield	S	0.001	0.001	0.001	
Aquitard vertical hydraulic conductivity	Kva	1	1	1	ft/day
Aquitard saturated thickness	ba	3	3	3	ft
Aquitard thickness below stream	babs	3	3	3	ft
Aquitard porosity	n	0.2	0.2	0.2	
Stream width	ws	5	5	5	ft
Streambed conductance (lambda)	sbc	1.666667	1.666667	1.666667	ft/day
Stream depletion factor	sdf	22.500000	22.500000	176.400000	days
Streambed factor	sbf	25.000000	25.000000	70.000000	
input #1 for Hunt's Q_4 function	t'	0.044444	0.044444	0.005669	
input #2 for Hunt's Q_4 function	K'	7500.000000	7500.000000	58800.000000	
input #3 for Hunt's Q_4 function	epsilon'	0.005000	0.005000	0.005000	
input #4 for Hunt's Q_4 function	lamda'	25.000000	25.000000	70.000000	

Ground Water

Oregon Water Resources Department
(503)378-8455 • 158 12th St. NE, Salem, OR 97310

Hydrograph for State Well JACK 5523

Well Location	36.00S1.00W1ADC
Oregon Water Resources Department Well Log ID	JACK 5523
Oregon Water Resources Department State Observation Well Number	----
Well depth, in feet below land surface	
Land surface elevation, in feet above mean sea level	
Primary use of well	not determined

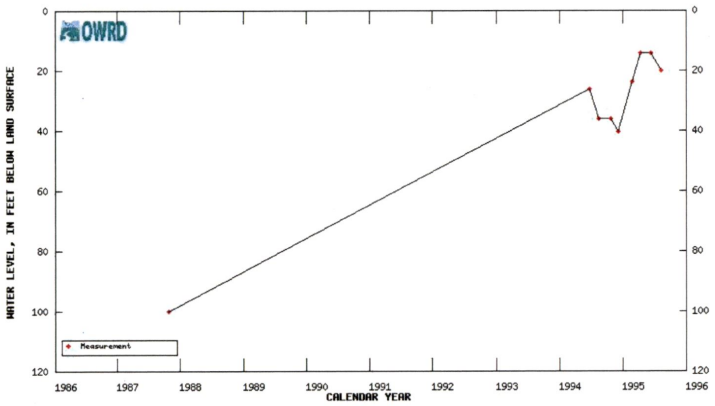


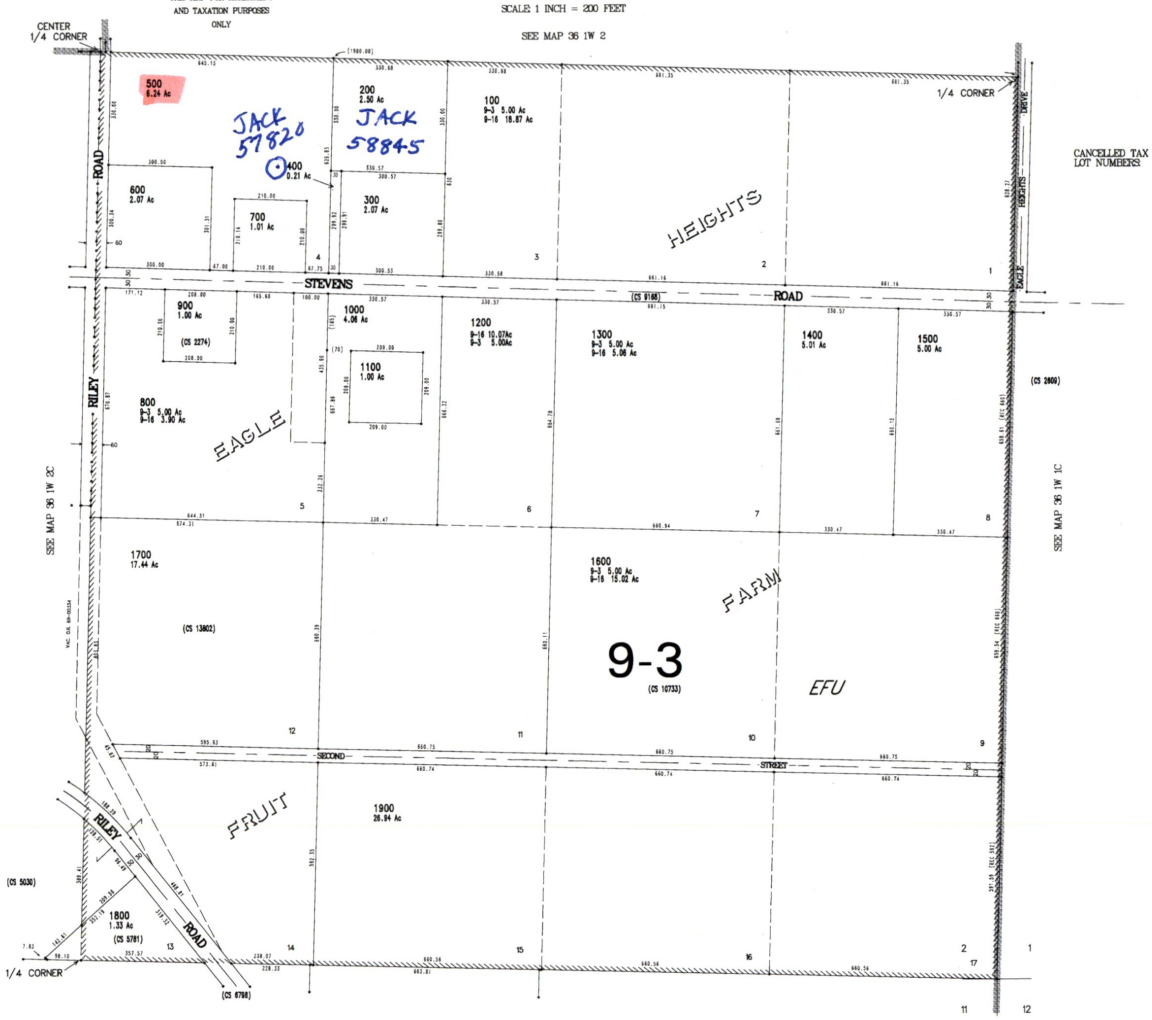
Table showing water-level data for State Well JACK 5523

SE 1/4 SEC.2 T.36S. R1W. W.M.
JACKSON COUNTY

36 1W 2D

IMPORTANT
THIS MAP FOR ASSESSMENT AND TAXATION PURPOSES ONLY

SCALE 1 INCH = 200 FEET



36 1W 2D
JS SEPTEMBER 94
RSV DECEMBER 20, 1999

METAFILE K:/MAP/36W/02/D/DD PLATCRA
CREATED WEDNESDAY SEPTEMBER 27, 2000 9:13 AM By LUNDBERG.

JACK 57820

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)
Instructions for completing this report are on the last page of this form.

WELL I.D. # L 79105
START CARD # 176628

(1) LAND OWNER Well Number
Name BRAD LIND
Address 1093 STEVENS RD
City EAGLE POINT State OR Zip 97524

(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 165 ft.
Explosives used ☐ Yes ☒ No Type Amount

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
10"	0	24'	BENTONITE	0	24	12 Sacks
6"	24'	165'				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other BENTONITE POURED DRY
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	42'	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4"	0	165'	.160	☐	☒	☐	☐
					☐	☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None
Final location of shoe(s) 42

(7) PERFORATIONS/SCREENS:
☒ Perforations Method SAW
☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
40'	165'	1/8	24'	4"	.160	☐	☒
						☐	☐
						☐	☐
						☐	☐

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

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

Temperature of water 52° 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 36 N or S Range 1W E or W. WM.
Section 20 NW 1/4 NW 1/4
Tax Lot 500 Lot Block Subdivision
Street Address of Well (or nearest address) 1093 STEVENS RD EAGLE POINT OR 97524

(10) STATIC WATER LEVEL:
30' ft. below land surface. Date Dec 12,05
Artesian pressure lb. per square inch Date

(11) WATER BEARING ZONES:
Depth at which water was first found 50'

From	To	Estimated Flow Rate	SWL
50'	52'	3gpm	30'
158	156'	42gpm	30'

(12) WELL LOG:
Ground Elevation

Material	From	To	SWL
SOIL (BROWN)	0	3'	
CLAYS (BROWN)	3'	12'	
CLAYSTONE (YELLOW)	12'	18'	
CLAYSTONE (BLUE)	18'	26	
CLAYSTONE (GREY)	26'	52'	30'
CLAYSTONE (BLUE	52'	165'	30'

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DEC 19 2005
WATER RESOURCES DEPT
SALEM, OREGON

Date started Dec 8,05 Completed Dec 12,05

(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 Scott Coffman WWC Number 1705 Date Dec 12, 05

(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 Jack N. Boettcher WWC Number 172 Date Dec 12,05

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Jack
50748

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

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

36S/01W/02BD

(START CARD) # 82804

(1) OWNER: Well Number LO6211
Name Matt Dyman
Address 104 N. Shasta
City Eagle Point State OR Zip 97524

(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 200 ft.
Explosives used ☐ Yes ☑ No Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
10"	0	19'	BENTONITE	0	19'	12 SK
6"	19	200				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☑ Other Poured in Dry
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"	0	19	250	☑	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4"	0	200	160	☐	☑	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) ____

(7) PERFORATIONS/SCREENS:
☑ Perforations Method Saw cut
☐ Screens Type 4"-160 Material P.V.C.

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
180	198	1/4"	45	1/4 x 12"		☐	☑
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Time
100	200	200	1 hr.

Temperature of water 56° 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 36 N or (S) Range 1 E or (W) WM.
Section 2C NW 1/4 SE 1/4
Tax Lot 1001 Lot ____ Block ____ Subdivision ____
Street Address of Well (or nearest address) Stevens Rd. Eagle Point, OR

(10) STATIC WATER LEVEL:
60 ft. below land surface. Date 10-14-96
Artesian pressure ____ lb. per square inch. Date ____

(11) WATER BEARING ZONES:
Depth at which water was first found 180'

From	To	Estimated Flow Rate	SWL
180	182	100	60

(12) WELL LOG:
Ground Elevation ____

Material	From	To	SWL
Clay Brown	0	11	
Sandstone Blue	11	200	60

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SALEM, OREGON

RECEIVED
APR 18 1997
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 10-14-96 Completed 10-14-96

(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 10-14-96

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JACK 5582

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NOV 21 1988
WATER RESOURCES DEPT
SALEM, OREGON

36S/1W/2bd

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

(START CARD) # 2840

(1) OWNER:
Well Number:
Name MR Douglas R. REIN
Address 2540 HOWARD AVE.
City MEDFORD State OR Zip 97501

(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 200 ft.
Explosives used Yes ☐ No ■ Type — Amount —

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
10"	0	20	BENTONITE	0	20	26
6	20	200				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
■ Other DRY POURED BENTONITE
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	34	250	■	☐	■	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4"	0	200	160	☐	☐	■	☐
					☐	☐	☐	☐

Final location of shoe(s) 34 FEET

(7) PERFORATIONS/SCREENS:
■ Perforations Method HAND SAW
☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
40'	200	1/8	120	24"L		☐	■
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Time
20 ++	NONE		1 hr.
BAILED 1 HR. NEVER DROPPED SWL AT ALL			

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: 90' - 100'

(9) LOCATION OF WELL by legal description:
County Jackson Latitude ' " Longitude ' "
Township 36 S N or S, Range 1 W E or W, WM.
Section 2 SE ¼ NW ¼
Tax Lot 700 Lot Block Subdivision
Street Address of Well (or nearest address) STEAVENS & PALIMA

(10) STATIC WATER LEVEL:
70 ft. below land surface. Date 10-26-88
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:
Depth at which water was first found 90' - 100'

From	To	Estimated Flow Rate	SWL
90 FEET	100 FEET	20 GPM +	70

(12) WELL LOG:
Ground elevation 1800

Material	From	To	SWL
STICKY CLAY & ROCK	0	12	
CLAYSTONE	12	200	70

Date started 10-22-88 Completed 10-28-88

(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.

Signed RON KENT (HELPER) 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 Larry L Kent WWC Number 1463
Date 10-30-88

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JACK 34436

3S/1W/2

14

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

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

(START CARD) # 79216

(1) OWNER: Well Number

Name Robert Frank

Address 1093 Stevens

City Eagle Point State OR Zip 97524

(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 205 ft.

Explosives used ☐ Yes ☒ No Type Amount

HOLE Diameter	From	To	Material	SEAL From	To	Sacks or pounds
			NOT DISTRUBED			

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:					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4	-2	92		☐	☒	XX	☐
		97	142		☐	☐	☐	☐
		147	205					

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☒ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
142	147	10				☐	☐
92	97	10				☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
30		204	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 Jackson Latitude Longitude

Township 36S N or S Range 1W E or W. WM.

Section 2 1/4 1/4

Tax Lot 706 Lot Block Subdivision

Street Address of Well (or nearest address) 1093 Stevens

(10) STATIC WATER LEVEL:

105 ft. below land surface. Date

Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found

From	To	Estimated Flow Rate	SWL
			105

(12) WELL LOG:

Ground Elevation

Material	From	To	SWL
Sandstone Blue	190	205	105

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AUG 31 1995
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 8/14/95 Completed 8/15/95

(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 679

Signed John Studebe Date 8/28/95

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JACK 58845

Medina Well Drilling, Inc.
(541) 664-6949
3256 Hanley Road
Central Point, OR 97502

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

WELL I.D. # L 96731

START CARD # 195974

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

(1) LAND OWNER Well Number _____
Name **Ed Hanscom**
Address **P O Box 1050**
City **Eagle Point** State **Or** Zip **97524**

(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 **300** ft.
Explosives used: ☐ Yes ☑ No Type _____ Amount _____

BORE HOLE Diameter	From	To	SEAL Material	From	To	Sacks or Pounds
10"	0	38	Cement	0	38	10 sacks
6"	38	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

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6"	+2	38	.250	☑	☐	☑	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4"	0	300	Sch 40	☐	☑	☐	☑
			Certa-	Lok	☐	☐	☐	☐

Drive Shoe used ☐ Inside ☑ Outside ☐ None
Final location of shoe(s) **38**

(7) PERFORATIONS/SCREENS
☑ Perforations Method **Saw**
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
40	60	1x8x8	20			☐	☑
160	180	1x8x8	20			☐	☑
273	293	1x8x8	20			☐	☑
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Time
13 GPM		300	1 Hr.

Temperature of water **52°** 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: _____

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SALEM, OREGON

(9) LOCATION OF WELL (legal description)
County **Jackson**
Tax Lot **200** Lot _____
Township **36** S Range **1** W WM
Section **02** **SW** 1/4 **NE** 1/4
Lat _____ ° _____ ' _____ " or _____ (degrees or decimal)
Long _____ ° _____ ' _____ " or _____ (degrees or decimal)
Street Address of Well (or nearest address) **1159 Stevens Rd., Eagle Point, Or**

(10) STATIC WATER LEVEL
36 ft. below land surface. Date **7-30-08**
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found **55**

From	To	Estimated Flow Rate	SWL
55	251	13 GPM	36

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Soil, Black	0	4	
Clay, Yellow	4	16	
Claystone, Brown	16	33	
Claystone, Grey	33	55	
Claystone, Grey/Black	55	116	
Claystone, Grey/Red	116	127	
Claystone, Grey/with Sandstone Streaks	127	161	
Claystone, Grey/Red	161	176	
Claystone, Grey	176	300	36

Date Started **7-29-08** Completed **7-30-08**

(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 **1857** Date **7-30-08**
Signed Ronald J. Martinez

(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 **1207** Date **7-30-08**
Signed Joaquin Medina

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JACK 58956

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

WELL I.D. # L 96743

START CARD # 1005083

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

(1) LAND OWNER Well Number _____
Name **David Igelman**
Address **4100 Piedmont Terrace**
City **Mrdford** 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 **221** ft.
Explosives used: ☐ Yes ☑ No Type _____ Amount _____

BORE HOLE Diameter	From	To	SEAL Material	From	To	Sacks or Pounds
6"	142	221	not disturb			

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:	n/a				☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4"	0	221	Sch 40	☐	☑	☐	☑
			Certa-	Lok	☐	☐	☐	☐

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

(7) PERFORATIONS/SCREENS
☑ Perforations Method **Saw**
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
120	140	1/8x8	20			☐	☑
175	215	1/8x8	40			☐	☑
						☐	☐
						☐	☐
						☐	☐

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

Yield gal/min	Drawdown	Drill stem at	Time
4 GPM		221	1 Hr.

Temperature of water **52°** 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 **200** Lot _____
Township **36** S Range **1** W WM
Section **2** _____ 1/4 _____ 1/4
Lat **42** ° **28** ' **3** " or _____ (degrees or decimal)
Long **122** ° **47** ' **19** " or _____ (degrees or decimal)
Street Address of Well (or nearest address) **915 Stevens Rd., Eagle Point, Or**

(10) STATIC WATER LEVEL
11 ft. below land surface. Date **9-29-08**
11 ft. below land surface. Date **9-29-08**
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found **156**

From	To	Estimated Flow Rate	SWL
156	157	4 GPM	11

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Claystone, Grey	142	221	11

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WATER RESOURCES DEPT
SALEM OREGON

Medina Well Drilling, Inc.
(541) 664-6339
3286 Hanley Road
Central Point, OR 97502

Date Started **9-29-08** Completed **9-29-08**

(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 **1857** Date **9-29-08**
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 **1207** Date **9-29-08**
Signed _____

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14

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

Gribble Well Drilling

SEP - 9 19[illegible]

JACK 31915

36S/1W/2aa

(START CARD) # 41413

(1) OWNER: Well Number 2

Name Jack Pech

Address 1092 Stevens Road

City Eagle Point State Or Zip 97524

(2) TYPE OF WORK:

[X] New Well [ ] Deepen [ ] Recondition [ ] Abandon

(3) DRILL METHOD:

[X] Rotary Air [ ] Rotary Mud [ ] Cable

[ ] Other

(4) PROPOSED USE:

[X] Domestic [ ] Community [ ] Industrial [ ] Irrigation

[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval [ ] Yes [X] No Depth of Completed Well 200 ft.

Explosives used [ ] Yes [X] No Type Amount

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
10"	0	23	bent	0	23	650#
6"	0	200				

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E

[X] Other poured dry

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	59	250	[X]	[ ]	[X]	[ ]
					[ ]	[ ]	[ ]	[ ]
					[ ]	[ ]	[ ]	[ ]
					[ ]	[ ]	[ ]	[ ]
Liner:	4"	0	200	160	[ ]	[X]	[X]	[ ]
					[ ]	[ ]	[ ]	[ ]

Final location of shoe(s) 59'

(7) PERFORATIONS/SCREENS:

[X] Perforations Method saw

[ ] Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
140	200	6"	90	1/8		[ ]	[X]
						[ ]	[ ]
						[ ]	[ ]
						[ ]	[ ]
						[ ]	[ ]

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

[ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
30		200'	1 hr.

Temperature of Water 56 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 36 S N or S. Range 1 W E. or W. WM.

Section 02 NE ¼ NE ¼

Tax Lot 2700 Lot Block Subdivision

Street Address of Well (or nearest address) same

(10) STATIC WATER LEVEL:

60 ft. below land surface. Date 8-10-92

Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 184'

From	To	Estimated Flow Rate	SWL
184	195	30	60

(12) WELL LOG:

Ground elevation

Material	From	To	SWL
soil brown	0	2	
shale brown	2	18	
shale grey	18	200	60'

Date started 8-10-92 Completed 8-10-92

(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 WWC Number 1496

Date 8-15-92

(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 WWC Number 205

Date 8-15-92

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER 9809C 10/91

RECEIVED

JUN 20 1988

JACK 5584

36s/1W-2db

STATE OF OREGON

WATER WELL REPORT
(as required by ORS 537.765)

(START CARD) # ____

(1) OWNER: Well Number: ____

Name Mr. & Mrs. Ishida

Address P.O. Box 1084

City Medford State Ore. Zip 97501

(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 400 ft.

Explosives used Yes ☐ No ☒ Type ____ Amount ____

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
10"	0	22	Bent	0	22	600 lbs
6"	22	400				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E

☒ Other Poured Dry

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	59'	250	☒	☐	☒	☐
Liner:	4"	0	400	160	☐	☒	☐	☐

Final location of shoe(s) 59'

(7) PERFORATIONS/SCREENS:

☒ Perforations Method Saw

☐ Screens Type ____ Material ____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
340	400	6"	XXX 90	1/8		☐	☒

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
17		400	1 hr.

Temperature of water 57 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 36s N or S, Range 1w E or W, WM.

Section 2 NW ¼ SE ¼

Tax Lot 3300 Lot ____ Block ____ Subdivision ____

Street Address of Well (or nearest address) Stevens Rd. Eagle Point, Ore. 97524

(10) STATIC WATER LEVEL:

50 ft. below land surface. Date 6/13/88

Artesian pressure ____ lb. per square inch. Date ____

(11) WATER BEARING ZONES:

Depth at which water was first found 353'

From	To	Estimated Flow Rate	SWL
353	360	4	50
371	375	13	50

(12) WELL LOG: Ground elevation ____

Material	From	To	SWL
Soil Brown	0	7	
Clay Yellow	7	15	
Claystone Brown	15	33	
" Gray	33	72	
" Red	72	153	
" Gray	153	210	
" Red	210	232	
Sandstone Gray	232	400	50

Date started 6/11/88 Completed 6/13/88

(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.

Gribble Well Drilling 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.

WWC Number 705

Signed [signature] Date 6-16-88

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

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 35220

WATER WELL REPORT
STATE OF OREGON
(Please type or print) (Do not write above this line)

RECEIVED
JUL 13 1976
WATER RESOURCES DEPT.
SALEM, OREGON

State Well No. .....
State Permit No. 36S/1W-2

(1) OWNER:
Name William Smail
Address 963 Stevens Rd.
Eagle Point, 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 ☒ Driven ☐
Cable ☐ Jetted ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):
Domestic ☒ Industrial ☐ Municipal ☐
Irrigation ☐ Test Well ☐ Other ☐

CASING INSTALLED: Threaded ☐ Welded ☐
..... " Diam. from ..... ft. to ..... ft. Gage .....
..... " Diam. from ..... ft. to ..... ft. Gage .....
..... " Diam. from ..... ft. to ..... ft. Gage .....

PERFORATIONS: Perforated? ☐ Yes ☐ No.
Type of perforator used
Size of perforations in. by in.
..... perforations from ..... ft. to ..... ft.
..... perforations from ..... 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?
Yield: gal./min. with ft. drawdown after hrs.
" " "
" " "
AIR
Bailer test 15 gal./min. with 101 ft. drawdown after 1½ hrs.
Artesian flow g.p.m.
Temperature of water Depth artesian flow encountered ..... ft.

(9) CONSTRUCTION:
Well seal—Material used
Well sealed from land surface to ..... ft.
Diameter of well bore to bottom of seal ..... in.
Diameter of well bore below seal ..... in.
Number of sacks of cement used in well seal ..... sacks
Number of sacks of bentonite used in well seal ..... sacks
Brand name of bentonite
Number of pounds of bentonite per 100 gallons of water ..... lbs./100 gals.
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
¼ ¼ Section 2 T. 36S R. 1W W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.
Depth at which water was first found 60 ft.
Static level 42 ft. below land surface. Date 7/10/76
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:
Diameter of well below casing 6
Depth drilled 95 ft. Depth of completed well 143 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 information. *Report each change in position of Static Water Level and indicate principal water-bearing strata.*

MATERIAL	From	To	SWL
Claystone--gray	48	66	
Claystone--brown	66	70	
Sandstone--gray	70	80	
Claystone--gray	80	92	
Sandstone--gray	92	143	
NO water when started			

Work started 7/10 1976 Completed 7/10 1976
Date well drilling machine moved off of well 7/10 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] Wayne Milbourn (Drilling Machine Operator) Date 7/12, 1976
Drilling Machine Operator's License No. 483

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 Virgle Gribble Well Drilling (Person, firm or corporation) (Type or print)
Address 8380 Ramsey Road, Gold Hill, Ore.
[Signed] Wayne Milbourn (Water Well Contractor)
Contractor's License No. 461 Date 7/12, 1976

(USE ADDITIONAL SHEETS IF NECESSARY)

SP*45656-119