

JACK 14419

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37S 4W 31

STATE OF OREGON

WATER WELL REPORT

(as required by ORS 537.765)

DEC 19 1988

(START CARD) #

8541

(1) OWNER:

Name Bill Sears, Address 13696 N. Applegate Rd, City Grants Pass, State OR, Zip 97527

(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 250 ft.

Explosives used Yes No, Type, Amount

Table with columns: HOLE Diameter, SEAL Material, Amount sacks or 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) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of shoe(s) 85'

(7) PERFORATIONS/SCREENS:

Perforations Method Air perforator

Screens Type, Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Pump, Bailer, Air, Flowing Artesian

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

Table with columns: 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 37, Range 4, Section 31, Tax Lot 800, Block, Subdivision, Street Address of Well Same

(10) STATIC WATER LEVEL:

14' ft. below land surface, Date 11-22-88, Artesian pressure lb. per square inch, Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Table with columns: Material, From, To, SWL

Date started 11-21-88, Completed 11-22-88

(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.

Signed [Signature], WWC Number 1449, Date 12-13-88

(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.

Signed [Signature], WWC Number 1379, Date 12-14-88

761894

JACK 14419
For Official Use Only:

Received Date:
11-10-03

County Well Log ID #
JACK 14419

Well Identification Tag #
Z-68494

WELL IDENTIFICATION APPLICATION FORM

(please see attached instructions)

DO NOT COMPLETE THIS FORM IF YOU ARE SHARING THE WELL ON ANOTHER'S PROPERTY.

RECEIVED

NOV 10 2003

BUYER/CURRENT LANDOWNER (FOR PROPERTY WELL IS LOCATED ON):

Name: Robert N. WALDEN & EVA M. WALDEN

WATER RESOURCES DEPT
SALEM, OREGON

Mailing Address: 1465 KUBLI RD.

City: GRANTS PASS State: OR Zip: 97527 Phone: (541) 660-9218

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

WELL LOCATION:

County: JACKSON Well # (designation owner has given to well if multiple wells exist on same property): _____

Township: 37S North or South, Range: 4W East or West, Section: 31 _____ 1/4 _____ 1/4
(circle one) (circle one)

Tax Lot #: 800 (not the "tax acct.#") Type of Well: water supply monitoring _____

Address of Well: 1465 KUBLI RD GRANTS PASS, OR 97527
(Number) (Street) (City)

Does this well have a formal water right associated with it? Yes: _____ No:
(If unknown you may contact the Water Rights Information Group at 503-378-3739 extension 201 for research)

If Yes: Application #: _____ Permit #: _____ Certificate #: _____

(Optional): Latitude _____ Longitude _____ (May sometimes be obtained from Well Log Report)

WELL INFORMATION: (If available, attach copy of driller's well report. If report is not available please complete the following, at a minimum the prior landowner names going back until around the time the well would have been drilled. Prior landowners can be obtained from the County Assessor.)

Start Card #: 8541 Approx. Well Construction Date: 11-22-88

Well Constructor: VIC DURDEN WWC # 1449

Name of Land Owner at Time of Construction (or list of prior landowners)
BILL SEARS

Well Depth (in feet): 250' Static Water Level (in feet): 14'

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

Please Return Completed Form to: Well ID Program @ Oregon Water Resources Department
158 12th Street NE - Salem, OR 97301-4172, or fax to 503-378-8130