

JACK 17183

RECEIVED JACK 17183

385/3W-27A  
0074

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

JUN 13 1988

(START CARD) #

(1) OWNER: WATER RESOURCES DEPT.  
Name Applegate Christian Fellowship  
Address 7680 Highway 238  
City Jacksonville State OR Zip

(9) LOCATION OF WELL by legal description:  
County Jackson Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 38 N or S, Range 3W E or W, WM.  
Section 27A 1/4 1/4  
Tax Lot 302 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_  
same

(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 180 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
6	32	180	cement	0	22	16 sacks

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 \_\_\_\_\_

Diameter	From	To	Gauge	Casing/Liner			
				Steel	Plastic	Welded	Threaded
6	32	180	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4	0	180	.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 skillsaw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
40	180	1/4	254	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 20 Drawdown \_\_\_\_\_ Drill stem at 179 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: \_\_\_\_\_

(10) STATIC WATER LEVEL:  
\_\_\_\_\_ ft. below land surface. Date 5-6-88  
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	180	20	8

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
boulders and granite	0	6	
clay, brown w/rocks	6	18	
granite, grey	18	87	
" , grey and white	87	99	
" , light grey	99	130	20
" , med grey w/quartz	130	180	

Date started 5-6-88 Completed 5-7-88

(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 Frank M. Canada WWC Number 1432 Date 5-9-88

(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. 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 Studobaky WWC Number 677 Date 5-9-88

"START CARD"  
NOTICE OF BEGINNING OF WELL CONSTRUCTION  
(as required by ORS 537.762)

MAY -6 1988

WATER RESOURCES DEPT.  
SALEM, OREGON

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and Mailing Address Applegate Christian Fellowship  
7680 Hi-way 238  
Jacksonville, OR

Proposed Commencement Date 5-5-88

Proposed Well Depth 200, Diameter 6

- Domestic
- Thermal
- Community
- Injection
- Industrial
- Other
- Irrigation

Proposed Well Location: County Jackson  
Township 38 (N or S) Range 3W (E or W) Section 27A

At least 2 of these must be provided

1. \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of above section
2. street address of well location 7680 Hi-way 238  
Jacksonville OR
3. tax lot number of well location 302
4. attach approved map with location identified.  
(see reverse of this form for approved maps)

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

x [Signature]  
Owner's Signature

x [Signature]  
Bonded Water Well Constructor

Asst  
Title

License No. 677

5-4-88  
Date

Company Studebaker Drilling Inc

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.

JC 97-88W