

**WATER WELL REPORT**  
STATE OF OREGON

*Jack*  
**JACK 1915**  
**RECEIVED**  
NOV 18 1982

State Well No. *345/3W-32 dd*  
State Permit No. ....

**WATER RESOURCES DEPT.**  
**SALEM, OREGON**

**(1) OWNER:**

Name *Pat Minnor & Marilyn Stright*  
Address *13777 E. EVANS Ck Rd*  
City *Rogue River* State *Oregon*

**(2) TYPE OF WORK (check):**

New Well  Deepening  Reconditioning  Abandon

If abandonment, describe material and procedure in Item 12.

**(3) TYPE OF WELL:**

Rotary Air  Driven  Domestic  Industrial  Municipal   
Rotary Mud  Dug  Irrigation  Test Well  Other   
 Bored  Thermal:  Withdrawal  Reinjection

**(4) PROPOSED USE (check):**

**(5) CASING INSTALLED:**

Steel  Plastic   
Threaded  Welded   
6" Diam. from 1-9" ft. to 105" ft. Gauge 250  
" Diam. from " ft. to " ft. Gauge

**LINER INSTALLED:**

" Diam. from " ft. to " ft. Gauge

**(6) 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?  
" gal./min. with " ft. drawdown after " hrs.  
Air test 300 + gal./min. with drill stem at 145 ft. 1 hrs.  
Bailer test gal./min. with " ft. drawdown after " hrs.  
Artesian flow 100 (36 Hrs) g.p.m. (60 gpm 12 Hrs) (35 gpm 72)  
Temperature of water 54 Depth artesian flow encountered " ft.

**(9) CONSTRUCTION:**

Special standards: Yes  No

Well seal—Material used *Cement Grout*  
Well sealed from land surface to 25' (80 to 105') ft.  
Diameter of well bore to bottom of seal " in.  
Diameter of well bore below seal " in. *(8 Surface) (72 Bottom)*  
Number of sacks of cement used in well seal  
How was cement grout placed? *1 Rim Tube (18) (110)*  
*Underreamed (80 to 105) Grout Pumped*  
*28 Sacks to Pump 8 Sack Surface Grout*  
Was pump installed? Type HP Depth ft.  
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  
*SE 1/4 SE 1/4 Section 345 T. 3W R. 32* W.M.  
Tax Lot # *2500* Lot Blk Subdivision  
Address at well location:

**(11) WATER LEVEL: Completed well.**

Depth at which water was first found *138'* ft.  
Static level *++++* ft. <sup>above</sup> ~~below~~ land surface. Date  
Artesian pressure *78 lbs* lbs. per square inch. Date *Nov 82*

**(12) WELL LOG:**

Diameter of well below casing *6"*

Depth drilled *145* ft. Depth of completed well *145* 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.

MATERIAL	From	To	SWL
<i>Red sod Top Soil</i>	<i>0</i>	<i>8</i>	
<i>Brown Decomposed Granite w/ Small Gravel</i>	<i>8</i>	<i>90</i>	
<i>Black Shale fractured</i>	<i>90</i>	<i>95</i>	
<i>Black Shale Solid</i>	<i>95</i>	<i>100</i>	
<i>Blue Green Firm Granite</i>	<i>100</i>	<i>145</i>	
<i>Fracture 138 To 142'</i>			

Work started *5 Oct* 19 *82* Completed *28 Oct* 19 *82*  
Date well drilling machine moved off of well *30 Oct* 19 *82*

**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] \_\_\_\_\_ Date \_\_\_\_\_, 19\_\_\_\_  
(Drilling Machine Operator)

Drilling Machine Operator's License No. \_\_\_\_\_

**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 *William Shanahan Well Drilling*  
(Person, firm or corporation) (Type or print)

Address *1464 Pine Grove Rd Rogue River*

[Signed] *William Shanahan*  
(Water Well Contractor)

Contractor's License No. \_\_\_\_\_ Date *15 Nov*, 19 *82*

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.

SP\*12658-690

# JACK 1915



Oregon Water Resources Department  
725 Summer Street NE, Suite A  
Salem Oregon 97301  
(503) 986-0900  
www.wrd.state.or.us

## Application for Well ID Number RECEIVED

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

MAR 01 2018

### I. OWNER INFORMATION

OWRD

Current Owner Name (please print): Bill Baquet  
Mailing Address: 14389 E Evans Creek Road  
City, State, Zip: Rogue River, OR 97537  
Mail Well ID Tag 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: 34 (North South) Range: 3 (East West) Section: 32 SE 1/4 of the SE 1/4  
Tax Lot (usually last 3-5 numbers of Tax Map #): 2500 County Jackson  
GPS Coordinates: Latitude 42.565763 - Longitude 123.075691  
Street Address of Well, City: 14389 E Evans Creek Road, Rogue River, Jack 1915 East Evans Creek Basin, R  
If the property had a different street address in the past: \_\_\_\_\_

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

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Industrial  
Date Well Constructed (or property built): 10/28/82 Total Well Depth: 145' Casing Diameter: 6"  
Owner at time the well was constructed (if known): Pat Minnor/M Stright Well Log # (if known): \_\_\_\_\_  
Other Information: RE: G-18343

SUBMITTED BY (please print): Bill Baquet  
PHONE: 626-353-3735 EMAIL &/or FAX: bbaquet@csifullmer.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.  
Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

3-1-18

Well Log Number:

JACK 1915

Well Identification #:

L-129032