

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

JACK JACK 30273
 AUG 9 1990
 30273

37S/1E/19
 (START CARD) # 17517

(1) **OWNER:** Well Number: 7 seven
 Name Robert C. Robertson
 Address 710 Gardley Avenue
 City Medford State OR Zip 97504

(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 300' ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
10'	0	18'	cement	0	18'	7 sacks
6'	18	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"	+18'	18.5'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	-1	300'	.250	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoets) _____

(7) **PERFORATIONS/SCREENS:**

Perforations Method skill saw
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
260	300	6"	180	1/8"	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	Drawdown	Drill stem at	Time
80		299'	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 37S N or S. Range 1E E or W. WM.
 Section 19 1/4 _____ 1/4 _____
 Tax Lot 500 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Pine Ridge Drive,

(10) **STATIC WATER LEVEL:**
100' ft. below land surface. Date 7-18-90
 Artesian pressure _____ lb. per square inch. Date _____

(11) **WATER BEARING ZONES:**
 Depth at which water was first found 58'

From	To	Estimated Flow Rate	SWL
58'	60	3	100'
262	280	77	100'

(12) **WELL LOG:** Ground elevation _____

Material	From	To	SWL
adobe	0	2	
clay, brown, hard	2	7	
rock, grey, hard	7	23	
claystone, red	23	27	
" , grey	27	35	
" , red/brown	35	44	
" , dark grey	44	58	
" , grey/green	58	60	80'
" , grey	60	101	
" , tan/red	101	109	
" , blue/grey	109	140	
" , red/brown	140	155	
" , grey/blue	155	160	
" , tan	160	205	
" , dark	205	210	
" , blue/grey	210	245	
" , light grey	245	262	
" , blue/grey	262	280	
" , grey	280	300	

STUDEBAKER DRILLING, INC.
 1400 Arnold Lane
 Medford, Oregon 97501

Date started 7-17-90 Completed 7-18-90

(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.
 Signed Shanku Canada 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 John Studabak WWC Number 679 Date 8/6/90

47382

For Official Use Only:

Received Date: _____ County Well Log ID # "JACK 30273" Well Identification Tag # 47382

WELL IDENTIFICATION APPLICATION FORM

BUYER/CURRENT WELL OWNER:

Name: DAVID C. HARDER & DEBRA R. HARDER

Mailing Address: 728 Cherrywood Drive

City: Medford State: OR Zip: 97504 Phone: 541-776-7436 541-779-4893

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

WELL LOCATION:

County: JACKSON Owner's Well Number (1st or 2nd, etc) 1

Township: 37 N or S (circle one), Range: 1 E or W (circle one), Section # 19

Quarter Quarter (NE, SE, NW, SW, etc.): W 1/2 1/4 1/4 Tax Lot Number: 300

Type of Well: water supply X monitoring Street Address of Well (if different from above): 7182 Pine Ridge Drive, Medford OR 97504

Lot 29 - SunRidge Estate Subdivision - Phase III -

WELL INFORMATION: (Complete as many blanks as you can. Attach a copy of well log if available)

Start Card Number: 17517 Approx. Construction Date: 7-18-1990

Well Constructor: John Studelaker Well Drilling

Name of Owner at Time of Construction: Bob Robertson DBA SunRidge Estate

Well Depth (in feet): 300 Static Water Level (in feet): 100

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

Does this well have a formal water right associated with it? Yes: X No: _____

If Yes: Application #: _____ Permit #: 000266-924 Certificate #: _____

Please Return Completed Form to:

Well Identification Program Oregon Water Resources Department 158 12th Street NE Salem, OR 97301-4172

RECEIVED

NOV 22 2000

WATER RESOURCES DEPT. SALEM, OREGON