

#13

345/16/10 cb

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

JACK
20828

JUN 17 1991 SCWP#91-08

Gribble Well Drilling

(START CARD) # 26160

(1) OWNER:

Name Duanne Krupla
Address PO Box 88
City Shady Cove State Ore. Zip 97539

Well Number: 1

(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 340 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	20	Bent	0	20	350lbs
6"	20	340				

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:

Casing/Liner	Diameter	From	To	Gauge	SEAL			
					Steel	Plastic	Welded	Threaded
Casing:	6"	+1	59	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	0	340	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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
280	340	6"	90	178		<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
25		340	1 hr.

Temperature of water 55 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 34S Nor S. Range 1W E or W, WM.
Section 10CC NW 1/4 SW 1/4
Tax Lot 1701 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 445 Hudspeth Rd.
Shady Cove, Ore. 97539

(10) STATIC WATER LEVEL:

100 ft. below land surface. Date 5/11/91
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 315'

From	To	Estimated Flow Rate	SWL
315	320	25	100

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
Soil Brown	0	2	
Clay Brown	2	14	
Claystone Brown	14	44	
" Gray	44	154	
" Red	154	157	
" Gray	157	255	
" Red	255	278	
Claystone Gray	278	340	100

Date started 5/11/91 Completed 5/11/91

(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 [Signature] WWC Number 1486
Date 5/26/91

(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 [Signature] WWC Number 705
Date 5/26/91