

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

*Jack*  
 32281

**RECEIVED**

*36s/1w/2ac*

MAR 23 1993

(START CARD) # 44628

Gribble Well Drilling WATER RESOURCES DEPT.

(1) OWNER: Well Number 2  
 Name John Rachor-Applegate Resturants Inc  
 Address R.A.Murphy Const. 1605 Brownsboro-Mer  
 City Eagle Point State Ore. Zip 97524

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

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	60	Cement	0	60	20 sacks
6"	60	200				

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"	+2	78	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	0	200	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 78'

(7) PERFORATIONS/SCREENS:  
 Perforations Method Saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
90	180	6"	150	1/8		<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
18		200	1 hr.

Temperature of Water 56 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 36S N or S. Range 1W E or W. WM. \_\_\_\_\_  
 Section 2d SW 1/4 NE 1/4  
 Tax Lot 3205 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) Next to Prestige Homes, Hwy 62, White City, Ore 97503

(10) STATIC WATER LEVEL:  
10 ft. below land surface. Date 3/18/93  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 94'

From	To	Estimated Flow Rate	SWL
94	96	8	10
110	120	4	10
132	134	3	10
158	160	3	10

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

Material	From	To	SWL
Soil Brown	0	4	
Conglomerate Brown	4	18	
Claystone Brown	18	52	
Claystone Gray	52	200	10

Date started 3/18/93 Completed 3/18/93

(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.  
 WWC Number \_\_\_\_\_  
 Signed \_\_\_\_\_ 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.  
 WWC Number 1488  
 Signed \_\_\_\_\_ Date \_\_\_\_\_