Corrected by WRD staff

14 JACK 33969

DEC 13 1994

38S/1W/11

(START CARD) # 72210

STATE OF OREGON WATER WELL REPORT

(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

(1) OWNER: Well Number _____

Name Robert CARR

Address 5055 FERN Valley Rd

City MEDFORD State OR Zip 97504

(2) TYPE OF WORK

☑ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:

☑ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger

☐ Other _____

(4) PROPOSED USE:

☐ Domestic ☐ Community ☐ Industrial ☐ Irrigation

☐ Thermal ☐ Injection ☑ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☑ No Depth of Completed Well 260 ft.

Explosives used ☐ Yes ☑ No Type _____ Amount _____

HOLE Diameter	From	To	SEAL Material	From	To	Sacks or pounds
10"	0	19	BENTONITE	0	19	9
6"	19	260				

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:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6"	+1	19	.250	☑	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4"	0	260	.160	☐	☑	☑	☐
					☐	☐	☐	☐

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
200	260	1/8x6	120			☐	☑
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
5		260	1 hr.

Temperature of water 60° 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 38S N or S Range 1W E or W. WM.

Section 11 SW 1/4 NE 1/4

Tax Lot 500 Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) _____

5055 ~~SAME~~ FERN VALLEY RD

(10) STATIC WATER LEVEL:

48 ft. below land surface. Date 10/17/94

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 163

From	To	Estimated Flow Rate	SWL
163	164	5 gpm	48

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
TOP SOIL	0	4	
BROWN CLAY	4	12	
BROKEN BROWN SANDSTN.	12	13	
GREY SANDSTONE	13	104	
BROWN SANDSTONE	104	133	
GREY SANDSTONE	133	163	
BROKEN SANDSTONE	163	164	48'
GREY SANDSTONE	164	260	

ASHLAND DRILLING
600 S. PACIFIC HWY.
TALENT, OR 97540
(503) 488-2827 772-1803

Date started 10/17/94 Completed 10/17/94

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

WWC Number 1604

Signed _____ Date 11/1/94

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 1478

Signed _____ Date 11/1/94

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER