STATE OF OREGON

Depth of strata:

RECEIVED W 3458

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MAY	2	Ĩ	198G
	•	- A	3.20303

WATER WELL REPORT MATER RESOURCES DEPT (9) LOCATION OF WELL by legal description: (1) OWNER: John Haworth _______Longitude _ County Jackson Latitude _ Name 7935 Blackberry Circle 2wN or S, Range _____ E or W, WM. Address 90620 + State SE _4 <u>NE</u> Buena Park City __ Block _ Subdivision (2) TYPE OF WORK: Street Address of Well (or nearest address) Corner Rds. White City, Ore. 97503 Beagle & Winnetka New Well Deepen ☐ Recondition ☐ Abandon (3) DRILL METHOD: (10) STATIC WATER LEVEL: Rotary Air ☐ Cable Other ☐ Rotary Mud ft. below land surface. _ lb. per square inch. Artesian pressure ___ (4) PROPOSED USE: (11) WELL LOG: Ground elevation ☐ Industrial ☐ Irrigation Domestic ☐ Community From То WB? SWL Material ☐ Other ☐ Injection hermal 2 0 Soil Brown (5) BORE HOLE CONSTRUCTION: 20 2 Claystone Brown Depth of Completed Well 28 20 Gray Special Standards date of approval 30 Brown SEAL Amount HOLE Material From 30 meter From To sacks or pounds 11 Gray *1 32 35 Brown 10" 38 Cement 0 11 sacks 8 35 60 11 <u>60</u> Gray 120 63 11 Brown 63 66 11 Gray 66 71 68 8 Brown 8 71 120 108 Gray Backfill placed from __ _ ft. to ___ _ ft. Material Gravel placed from _ ft. to . Size of gravel (6) CASING/LINER: To Gauge Steel Plastic Welded Threaded Diameter From 39 \Box \Box Liner: 39* location of shoe(s) PERFORATIONS/SCREENS: ☐ Perforations Method ☐ Screens Material Tele/pipe Slot To Number Diameter Casing size size Liner Completed (unbonded) Water Well Constructor Certification: (8) WELL TESTS: Minimum testing time is 1 hour I constructed this well in compliance with Oregon well construction Flowing ☐ Pump ☐ Bailer , Air ☐ Artesian standards. Materials used and information reported above are true to my best Time knowledge and belief. Drill stem at Yield gal/min Pumping level ⅓ hr -120 Date. Signed _ 1 hr (bonded) Water Well Constructor Certification: I accept responsibility for construction of this well and its compliance with all Oregon water well standards. This report is true to the best of my Depth Artesian Flow Found knowledge and belief. 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 _ Gribble Well Drilling

47796

For Official Use Only:

Received Date:

County Well Log ID#

Jack 3458

Well Identification Tag #

47796

WELL IDENTIFICATION APPLICATION FORM

BUYER/CURRENT WELL OWNE	R:	Please SEND WELL TO THE-TO ADDRESS ON CARD BELOW.
Name: ESTATE OF MA	977'e D. HAYW	ORTH
Mailing Address: 3357 B	EAGLE RD.	
City: WHITE CITY	State: OR Zip: 9750) 3 Phone: (54/) 826 - 6572
NOTE: Well Identification Tag	will be sent to the above a	address unless otherwise specified.
WELL LOCATION:	(1) 医骨髓管膜炎 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
County: JACKSON	Owner's W	Vell Number:
Township: 35 N or S, Rang	ge: 2ω E or W, Section	on: _/3 1/41/4
Tax Lot Number:	_ Type of Well: water supp	oly monitoring
Street Address of Well (if different	from above):	
WELL INFORMATION: (do not co	mplete remainder of applicat	tion if well log is available RECEIVED
Start Card Number:		ection Date:
Well Constructor:	and the second s	MAR 1 5 2001
Name of Owner at Time of Constru	ection:	WATER RESOURCES DEPT. SALEM, OREGON
Well Depth (in feet):	Static Water Lev	vel (in feet):
Diameter of Exposed Well Casing ((in inches):	
Does this well have a formal water	right associated with it? Yes	:: No:
If Yes: Application #:		
Please Return Completed Form In	Roger Wright	o
LO TAG TO:	Well Identification Program Oregon Water Resources Dep 158 12th Street NE	

Salem, OR 97301-4172

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PREVIOUS VERSIONS SHOULD NOT BE USED

REVISED: 4/21/2000