

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

*JACK
34582*

SEP 12 1988

34582/11/15

WATER RESOURCES DEPARTMENT (START CARD) # 7783

(1) OWNER:

Name GARY ANTAINE
 Address P.O. BOX 257
 City SHADY COVE State OR Zip 97539

Well Number: 7783

(2) TYPE OF WORK: CLEAN OUT-- LINER

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 270

Explosives used Yes No Type _____ Amount _____

Diameter	HOLE		Material	SEAL		Amount sacks or pounds
	From	To		From	To	
N/A						

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	Material			
				Steel	Plastic	Welded	Threaded
Casing: <u>N/A</u>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner: <u>4"</u>	<u>0</u>	<u>270</u>	<u>160 PSI</u>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method SAW
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
170	270	1X8X8	100			<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
35	149	270	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 34S N or S, Range 1W E or W, WM.
 Section 15 1/4 _____ 1/4 _____
 Tax Lot 1100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) CORNER OF INDIAN CREEK ROAD AND HWY 62 SHADY COVE

(10) STATIC WATER LEVEL:

121 ft. below land surface. Date 9-1-88
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 121

From	To	Estimated Flow Rate	SWL
		35 GPM	121

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
CLEAN-OUT WELL INSTALLED 4" LINER 0-270'			

Date started 9-1-88 Completed 9-1-88

(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 MEDINA WELL DRILLING WWC Number _____
3286 Hanley Road 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 Joaquin Medina WWC Number 1207
 Date 9-2-88