

RECEIVED Jack 51409

STATE OF OREGON SEP 19 1997  
WATER WELL REPORT  
(as required by ORS 537.765)  
WATER RESOURCES DEPARTMENT  
GRUBBLE WELL DRILLING INC.  
SALEM, OREGON

(START CARD) # 81306

(1) OWNER: Well Number L-11632  
Name Rogue Meadows Estates  
Address 20 Brophy Way  
City Shady Cove State Ore Zip 97539

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

HOLE Diameter	From To		SEAL Material	From To		Amount sacks or pounds
6"	350	500				
Seal was not disturbed						

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:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	0	500	160	<input checked="" type="checkbox"/>	<input checked="" 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
220	240	10"	36	1/8		<input type="checkbox"/>	<input checked="" type="checkbox"/>
320	340	"	"	"		<input type="checkbox"/>	<input checked="" type="checkbox"/>
440	480	"	72	"		<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 40 Drawdown \_\_\_\_\_ Drill stem at 500 Time 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 N42°35'56.6" Longitude W122°49'13"  
Township 34S N or S. Range 1W E or W. WM.  
Section 28 NE 1/4 SW 1/4  
Tax Lot 102 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) Same as # 1

(10) STATIC WATER LEVEL:  
24 ft. below land surface. Date 8/13/97  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 442'

From	To	Estimated Flow Rate	SWL
442	450	25	24
Well had 15 gpm to start with a 24' static water level.			

(12) WELL LOG:

Ground elevation \_\_\_\_\_

Material	From	To	SWL
Claystone Gray	350	500	24

Date started 8/13/97 Completed 8/13/97

(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 \_\_\_\_\_ WWC Number \_\_\_\_\_  
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 [Signature] WWC Number 205  
Date 8-15-97