

JACK 52166

WELL IDENTIFICATION FORM

Owner's Well Number: _____

WATER RESOURCES DEPT.
SALEM, OREGON

APR - 3 1998

RECEIVED

CURRENT WELL OWNER:

Phone 541-826-1430Name: JERRY & TERRI LONGMailing Address: 1375 W LINN RD.City: EAGLE PT State: OR Zip: 97524

WELL LOCATION:

"JACK 52166"

County: JACKSON

Latitude: _____ Longitude: _____

Township: 36 N or S, Range: 16 E or W Section: 05 1/4 1/4Tax Lot Number: 204

Street Address of Well (if different from above): _____

If a well report is available for this well, please attach a copy of it to this form and return. It is not necessary for you to complete the remainder of the form if the well report is attached. If a well report is not available, please complete the remainder of the form to the best of your ability.

WELL INFORMATION:

Start Card Number: _____ Approx. Construction Date: _____

Well Constructor: _____

Name of Owner at Time of Construction: _____

Well Depth (in feet): _____ Static Water Level (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 #: _____ Permit #: _____ Certificate #: _____

Please Return Completed Form to:

Oregon Water Resources Department
158 12th Street NE
Salem, OR 97310

(Office use only)

Well Identification Number: _____

24606



ACCURATE WELL Testing & Repair

Mailing Address: P.O. Box 91, Murphy, Oregon 97533

Phones: Medford, 772-9878 • Grants Pass, 479-7272

Owner: Steve King

PUMP CONTRACTOR LICENSE NO. 459 CPI

WATER RESOURCES DEPT.
SALEM, OREGON

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DATE 8-16-94

NO ONE BEATS OUR SERVICE

TEST ORDERED

☒ FLOW, DRAW DOWN \$ 98.00
☒ BACTERIOLOGY ONLY \$ 30.00
☒ NITRATE \$ 30.00
☐ CHLORINATE \$ _____
☒ EXTRA Escrow \$ 10.00
☐ PAID \$ _____ TOTAL 168.00

COMPLETE RESULTS

AVERAGE GPM 20
TOTAL GALLONS FLOWED 4800
STATIC LEVEL AT START _____
TOTAL DRAWDOWN _____
TOTAL RECOVERY _____ WITHIN MIN. _____
WELL YIELD IN GPM AFTER 4 HRS. 20

TEST ORDERED BY: Brenda Woodrich

REALTY: Vaughn E.R.A. Real Estate

ADDRESS: 820 Crater Lake Ave. Med, Or. 97501

REALTY: _____

ADDRESS: _____

OWNER: _____

ADDRESS: _____

BUYER: _____

ADDRESS: _____

WELL LOCATION: 1375 Linn Rd Eagle Point, Or. 97524

BUS: 779 6187

HOME: _____

BUS: _____

HOME: _____

BUS: _____

HOME: _____

BUS: _____

HOME: _____

WATER SOURCE: WELL ☒ SPRING ☐ HAND DUG ☐ DATE WELL DRILLED 8/16/94
WELL DIA. 10" BAIL TEST _____ DEPTH _____ GALS. NEEDED _____ PUMPING LEVEL _____
EQUIPMENT USED FOR TEST: JET PUMP ☐ H.P. _____ SLIB-PUMP ☒ H.P. 1 WATER METER ☒ SOUNDER ☐ yes
METER START 1370 METER STOP _____ ☒ ESTIMATED GALS. PER MIN. NEXT 4 HOURS 20
WELL RECOVERED TO _____ FT. IN _____ MIN. WELL HOUSE ☒ yes HAS CEMENT SLAB ☒ yes
DISTANCE CASING ABOVE GROUND 2' SCREENED RETURN BEND AIR VENT INSTALLED ☒ NO WELL IS OVER
100 FT. FROM DRAIN FIELD ☐ WELL LOCATED APPROX. 500' S.W. From Home
PRESSURE TANK ☒ yes 2 BLADDER ☒ yes 80 GALS. 80 Each PRESSURE RELIEF VALVE ☒ yes
LOW PRESSURE CUTOFF SWITCH ☒ yes AUTOMATIC AIR TO PRESSURE TANK ☒ NO ELECTRIC WIRING IN
CONDUIT ☒ NO WATER PIPE INSULATED ☒ yes WELL HOUSE INSULATED ☒ yes STORAGE TANK ☒ NO
GALS. _____ DOES SYSTEM APPEAR IN GOOD CONDITION ☒ yes COMMENTS: _____

FLOWS IN GALS. PER MIN.	DRAW DOWN IN FT.	FLOWS IN GALS. PER MIN.	DRAW DOWN IN FT.
0:00			
0:15 <u>20</u>		2:15 <u>20</u>	
0:30 <u>20</u>		2:30 <u>20</u>	
0:45 <u>20</u>		2:45 <u>20</u>	
1:00 <u>20</u>		3:00 <u>20</u>	
1:15 <u>20</u>		3:15 <u>20</u>	
1:30 <u>20</u>		3:30 <u>20</u>	
1:45 <u>20</u>		3:45 <u>20</u>	
2:00 <u>20</u>		4:00 <u>20</u>	

ANY COLOR NO ODOR NO CLEAR OR CLOUDY Clear ANY TASTE NO

IF BACTERIA OR CHEMICAL TEST SAMPLE WAS TAKEN LABORATORY WILL MAIL COPY

LAB PHONE, GRANTS PASS 476-0733 ☒ MED. NEILSON RESEARCH 770-5678 ☐

ACCURATE WELL FLOW & PURITY TESTING guarantees the accuracy of this test on the date the test was conducted only and no way implies that the well flow or water quality would be the same on any future date, or that the flow would be the same for a longer period of pumping. There are too many factors that could alter the flow and the quality of the water.

Following is a list of conditions that could affect your well:

1. A neighboring well being pumped for a long period of time thereby lowering the water table in the area. 2. A new well being drilled to a deeper depth in the same area. 3. A well sanding in, thereby cutting off the flow. 4. A well may vary at different times of the year, especially in mountainous areas. 5. The water quantity and quality may change due to rains, irrigation, and surface water entering the well, etc. (There are also many other factors too numerous to list. Lending institutions accept a flow test only for 6 months after the test was made. As a general rule, nine out of ten flow tests remain the same and only vary in an exceptionally dry or wet year.)

I have read the WELL FLOW TEST REPORT and understand it.

Thank You

BUYER: _____

SELLER: Harold H. Hunt by Betty B. Hunt

REAL ESTATE AGENT: _____

DATE: 8-23-94

CONDUCTED BY: Gary Manna 8-16-94