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STATE OF OREGON WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT.
SALEM, OREGON

WELL I.D. # L 33351
START CARD # 115370

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

(1) OWNER:

Name Tom Tebeck Well Number _____
Address 663 Juniper
City Jacksonville State OR Zip 97530

(2) TYPE OF WORK

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

(3) DRILL METHOD:

☒ Rotary Air ☐ Rotary Mud ☒ Cable ☐ Auger
7060'
☐ 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 243 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10"	0'	18 1/2'	Bottom Seal	0'	18 1/2'	19 Sacks
8"	18 1/2'	61'				
6"	61'	243'				

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 1/2'	18 1/2'	250	☒	☐	☒	☐
Liner:	4"	2 1/2'	243'		☐	☒	☒	☐

Final location of shoe(s) 18 1/2' Shale to 243' + Shale to 243'

(7) PERFORATIONS/SCREENS:

		Method		Material	
		Type		Type	
From	To	Slot size	Number	Diameter	Tele/pipe size
163	243	6"	144	1 1/2"	

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

☐ Pump		☐ Bailer		☒ Air		☐ Flowing	
Yield gal/min	Drawdown	Drill stem at	Time	Yield gal/min	Drawdown	Drill stem at	Time
4		243	1 hr.				

Temperature of water 54° 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 37 S N or S Range 1E E or W. WM.
Section 04 SW 1/4 SW 1/4
Tax Lot 800 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1/4 mi Past Wren Ridge Dr on Antelope Rd

(10) STATIC WATER LEVEL:

67 ft. below land surface. * Date 8-5-99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found See Below

From	To	Estimated Flow Rate	SWL
123	143	THICK	
143	163	1	
163	203	1	
203	223	2	

(12) WELL LOG:

Material	From	To	SWL
Fractured Grey Basalt/Soil	0'	3'	—
" " " " " " "	3'	40'	—
" " " " " " "	40'	43'	—
Fractured Grey Basalt	43'	66'	—
Volcanic Grey/Reds	66'	68'	—
Volcanic Grey	68'	72'	—
Clay/Soft Claystone Brown	72'	79'	—
" " " " " " "	79'	90'	—
Volcanic Lx Grey	90'	96'	—
Basalt Grey	96'	126'	*
Volcanic (grey) Light Brown	126'		"
Ribs of Rock		135'	"
Basalt Dark Grey	135'	205'	"
Volcanic Grey	205'	208'	"
Tuff LT Grey	208'	214'	"
Volcanic Grey w/ Light	214'		"
Brown Rib 214-217		226'	"
Basalt Grey	226'	243'	"
* static still rising expect it to			
Rock 41 ft			

Date started 6-29-99 Completed 8-5-99

(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.

Signed [Signature] WWC Number 796 Date 8-11-99

(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.

Signed [Signature] WWC Number 1566 Date 8-2-99