

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

JACK
53835
GRIBBLE WELL DRILLING INC.

3-3400

(START CARD) # 127802

(1) OWNER: Well Number L-36963
 Name Rogue Valley Manor
 Address 1200 Mira Mar Ave
 City Medford State Ore Zip 97504

(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			SEAL		Amount sacks or pounds	
Diameter	From	To	From	To		
15"	0	38	Bent	0	38	1650 lbs
10"	38	500				

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:	10"	+2	38'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 38'

(7) PERFORATIONS/SCREENS:
 Perforations Method NA
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
65		500'	1 hr.

Pump Bailer Air Flowing Artesian

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

(9) LOCATION OF WELL by legal description:
 County Jackson Latitude N42°18'66.8" W Longitude 122°50'62.4"
 Township 37S N or S. Range 1W E or W. WM. _____
 Section 32A NE ¼ NW ¼
 Tax Lot 3400 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) Same as #1

(10) STATIC WATER LEVEL:
52' ft. below land surface. Date 5/8/00
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 97'

From	To	Estimated Flow Rate	SWL
97	103	12	52
254	260	35	52
326	340	18	52

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Soil Brown	0	2	
Claystone Brown	2	7	
Claystone Gray	7	17	
Conglomerate Gray	17	500	52

RECEIVED

JUN 09 2000

WATER RESOURCES DEPT.
 SALEM, OREGON

Date started 4/15/00 Completed 5/8/00

(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.
 WWC Number _____
 Signed _____ 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