

JACK 54401

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

(START CARD) # 82756

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

(1) OWNER: Well Number _____
Name Morton Smith
Address Box 1927
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
 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 80' ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10"	0	19	BENTONITE	0	19'	12 SCS
6"	19	80				

How was seal placed: Method A B C D E
 Other RAISED IN DRY
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	6"	11	19	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	0	80	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method SAND CUT
 Screens Type 4" P.V.C. 160 Material P.V.C.

From	To	Slot	Number	Diameter	Tele/pipe size	Casing	Liner
40	80	1/4"	80	4"x12"	4"	<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
40	80	80'	1 hr.

Temperature of water 96° 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 39 N or S Range 3 E of W.W.M.
Section 4 N/E 1/4 N/W 1/4
Tax Lot 1900 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 100 Conrail
Jacksonville (Benton Butte)

(10) STATIC WATER LEVEL:
18 ft. below land surface. Date 9-15-95
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 60'

From	To	Estimated Flow Rate	SWL
60'	75'	40	18

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
CLAY BROWN	0	3	
SANDSTONE BROWN	3	11	
SANDSTONE GRAY	11	25	
DIORITE GRAY	25	80	18

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WATER RESOURCES DEPT.
SALEM, OREGON

Date started 9-15-95 Completed 9-15-95

(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 _____ Date _____
WWC Number _____

(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 _____ Date 9-30-95
WWC Number 1457



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.wrd.state.or.us

Application for
Well ID Number

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name (please print): Indigo Owl (Greg Brown + Lauren Kelley)
Mailing Address: 7386 Hwy 238 PMB# 129
City, State, Zip: Jacksonville, OR 97530
Mail Well ID Tag to: [X] SAME AS ABOVE [] In Care Of (C/O)
Name & Address:
City, State, Zip: SALEM, OR

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II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 39S (North / South) Range: 3W (East / West) Section: 4
Tax Lot: 1900 County: JACKSON SW 1/4 SW 1/4

GPS Coordinates:
Street Address of Well, City: 1211 Burton Butte Rd Jacksonville, OR 97530
If the property had a different street address in the past: 611 Burton Butte Rd?

III. GENERAL WELL INFORMATION (Please fill out as completely as possible)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Domestic & Irrigation
Date Well Constructed (or property built): 9/6/95 Total Well Depth: 85' Casing Diameter: 6"
Owner at time the well was constructed (if known): Norton Smith
Other Information: JACK 54401 originally misfiled under township 38 instead of 39

SUBMITTED BY (please print): Greg Brown
PHONE: 5419443499 EMAIL &/or FAX: kalemeadow@gmail.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902. Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

1-15-16

Well Log Number:

JACK 54401

Well Identification #:

L-121028