

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

amended
 JACK 55403
 JACK 55403
GRIBBLE WELL DRILLING INC.

L. 55588

(START CARD) # 148617

(1) OWNER: Well Number L---
 Name River Run Water
 Address P.O. Box 526
 City Shady Cove, State Or. 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 340 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
6"	0 340	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	Grain	Steel	Plastic	Welded	Threaded
Casing:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	0	340	160	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method S&W
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
280	340	10	90	1/8		<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
15		340	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' Longitude _____
 Township 34S N or S. Range 1W E or W. WM. _____
 Section 10CC NW 1/4 SW 1/4
 Tax Lot 1701 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 445 Hudspeth Rd
Shady Cove, Or. 97539

(10) STATIC WATER LEVEL:
100' ft. below land surface. Date 5/20/02
 Artesian pressure _____ lb. per square inch. Date _____

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

From	To	Estimated Flow Rate	SWL
		N/A	

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
liner was removed and well cleaned to 340'			
new liner installed			

RECEIVED
MAY 28 2002
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 05/20/02 Completed 05/20/02

(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 5-23-02

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