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MAY 09 2005

WATER RESOURCES DEPT
SALEM, OREGONJACK
56626Amended 5/04/05 by Fred
KrasnerSTATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

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

(1) LAND OWNER

Name FREDDY SENHAUSER Well Number _____
Address 1710 E. NEVADA
City ASHLAND State OR Zip 97520

(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 221 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE

Diameter	From	To	Material	From	To	Sacks or pounds
8"	0	37	BENTONITE	53 1/2	58 1/2	2 SACKS
6"	58 1/2	221	" "	0	37	19 SACKS

SEAL

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☒ E
☒ Other POURED DRYBackfill 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	58 1/2	250	☒	☐	☒	☐
Liner:				☐	☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None
Final location of shoe(s) 58 1/2

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☐ Screens Type _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump	☐ Bailor	☒ Air	☐ Flowing
Yield gal/min	Drawdown	Drift stem at	Time
25		221	1 hr.

Temperature of water 58° 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: _____

WELL I.D. # 67139
START CARD # 158683

(9) LOCATION OF WELL by legal description:

County JACKSON Latitude _____ Longitude _____
Township 38S N or S Range 1E E or W, WM. _____
Section 26 SW 1/4 SW 1/4 Sec 34-05
Tax Lot 101 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1710 E. NEVADA SW 1/4 Sec 34-05

(10) STATIC WATER LEVEL:

_____ ft. below land surface. Date 2-7-04
Artesian pressure _____ lbs. per square inch

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
190	201	25	127

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
CLAY BROWN STICKY	0	3	
ROCK DARK BROWN	3	22	
WEATHERED 3-6			
VOLCANIC GREY & BRN MIX	22	35	
GREY	35	51	
BLACK w/WH QTZ	51	54	
GREY & BEN	54	57	
GREY	57	76	
DARK GREY	76	89	
SANDSTONE LIGHT GREY	89	113	
VOLCANIC DARK GREY	113		
CREVICE w/ BROWN			
ROCK 190-194		221	127

LEAVE PUMP ABOVE
190 FT.Date started 2-6-04 Completed 2-7-04

(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 Fred Krasner WWC Number 796
Date 2-7-04

(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 Fred Krasner WWC Number 796
Date 2-7-04

ORIGINAL - WATER RESOURCES DEPARTMENT FIRST COPY - CONSTRUCTION

RECEIVED JACK 56626

MAR 15 2004

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WATER RESOURCES DEPT
SALEM, OREGONWELL I.D. # L 67139
START CARD # 158683

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

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City ASHLAND State OR Zip 97520

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☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other _____

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Special Construction approval ☐ Yes ☒ No Depth of Completed Well 221 ft.
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HOLE

SEAL

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				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
Liner:				☐	☐	☐	☐
				☐	☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ NoneFinal location of shoe(s) 58 1/2

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
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Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____

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Depth of strata: _____

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County JACKSON Latitude _____ Longitude _____
Township 38S N or S Range 1E E or W. WM.
Section 27 NE 1/4 SE 1/4
Tax Lot 101 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1710 E. NEVADA

(10) STATIC WATER LEVEL:

127 ft. below land surface. Date 2-7-04
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
190	201	25	127
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FEB 25 2004			

WATER RESOURCES DEPT
SALEM, OREGON

Material	From	To	SWL
CLAY BROWN STICKY	0	3	
ROCK DARK BROWN	3		
WEATHERED 3-6		22	
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GREY	35	51	
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DARK GREY	76	89	
SANDSTONE LIGHT GREY	89	113	
VOLCANIC DARK GREY	113		
CREVICE W/ BROWN			127
ROCK 190-194		221	
/ LEAVE PUMP ABOVE /			
190 FT.			

Date started 2-6-04 Completed 2-7-04

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Signed Frank K... WWC Number 796 Date 2-7-04

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