

STATE OF OREGON  
**WATER WELL REPORT**  
 (as required by ORS 537.785)

DEC 4 1986  
 WATER RESOURCES DEPT.  
 SALEM, OREGON

JACK  
 868

345/1W-15 CA

(1) OWNER: \_\_\_\_\_ Well Number: \_\_\_\_\_  
 Name T.L. DENMAN  
 Address 21655 HWY 62 - P.O. Box 1170  
 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 170' ft.  
 Explosives used  Yes  No  Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
7"	0	38'	CEMENT	0'	38'	10 SACKS
6"	38'	170'				

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Gravel placed from -7' ft. to 170' ft. Size of gravel 3/8 pea

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6"	+1'	38'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:	4"	-1'	170'	160ksi	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 38'

(7) PERFORATIONS/SCREENS:  
 Perforations Method SKILL SAW  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
0'	70'	1/8"	40	6"	4"	<input type="checkbox"/>	<input checked="" type="checkbox"/>
170'	170'	1/8"	80	6"	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 80+- Drawdown \_\_\_\_\_ Drill stem at 150' Time 1 hr.

Temperature of water 50° 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 345 N or S, Range 1W E or W, WM.  
 Section 15 NE 1/4 SW 1/4  
 Tax Lot 900 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:  
20' ft. below land surface. Date 11-25-86  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
 Depth at which water was first found 55'

From	To	Estimated Flow Rate	SWL
55'	160'	80+-	20'

(12) WELL LOG: Ground elevation \_\_\_\_\_

Material	From	To	SWL
BROWN CLAY + Boulders	0'	33'	
Gray Claystone	33'	170'	20'

Date started 11-25-86 Completed 11-26-86

(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 [Signature] WWC Number \_\_\_\_\_ Date 11-29-86

(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 1379 Date 12-3-86