

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

WELL I.D. # L 73060
 START CARD # 169508

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

(1) LAND OWNER Well Number _____
 Name MYRON FOOT & Co. dba EDEN VALE WINERY
 Address 2310 VOORHIES RD
 City MEDFORD State OR Zip 97501

(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 PUBLIC

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 281 1/2
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL	
Diameter	From To	Material	From To Sacks or pounds
10"	0 58 1/2	BEAT. CHMS	0 58 1/2 23 2/3 SACKS
6"	58 1/2 282		

How was seal placed: Method A B C D E
 Other ROUSED 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: 6"	+1 1/2	58 1/2	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	-3 1/2	281 1/2	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoes(s) 58 1/2 FT

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type SLOTTED Material PVC

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
251	271	.032				<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Artesian
 Yield gal/min 15 1/2 Drawdown _____ Drill stem at _____ Time 1 hr.

Temperature of water 62° 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 38S N or S Range 1W E or W. WM.
 Section 5C SE 1/4 SW 1/4
 Tax Lot 2100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 2310 VOORHIES RD

(10) STATIC WATER LEVEL:
22 ft. below land surface. Date 11-24-04
 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
162	182	1/2 - 3/4	22
242	262	6 1/2	22
262	269	8 1/2	22

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
CLAY DARK BROWN STICKY	0	4	
CLAY BROWN GRITTY	4	9	
CLAY TAN w/ SM. GRAVEL	9	12	
SANDSTONE BROWN	12	15	
CLAY BROWN	15	22	
CLAYSTONE GREY	22	44	
SILTSTONE GREY	44	48	
CLAYSTONE GREY	48		
w/ RIBS BROWN SILTSTONE			
236-244		244	
SILTSTONE GREY FRACT.	244		22
LARGE FRACTURES			
262-264, 268-269		282	

RECEIVED

DEC 01 2004

WATER RESOURCES DEPT

Date started 1 SALEM, OREGON Completed 11-24-04

(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 Frederick K... WWC Number 796 Date 11-24-04

(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 Pioneer Drilling WWC Number 796 Date 11-24-04