

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

WELL I.D. # L 74646

START CARD # 168331

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

(1) LAND OWNER Name Linda Boylan Well Number \_\_\_\_\_  
Address 34971 Mitchellen Place  
City Medford State Or Zip 97504

(2) TYPE OF WORK  New Well  
 Deepening  Alteration (repair/recondition)  Abandonment  Conversion

(3) DRILL METHOD  Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Other \_\_\_\_\_

(4) PROPOSED USE  Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION Special Construction:  Yes  No  
Depth of Completed Well 60 ft.  
Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
10"	0'	20'	Cement	0'	20'	6 Sacks
6"	20'	60'				

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 \_\_\_\_\_

Diameter	From	To	Gauge	SEAL			
				Steel	Plastic	Welded	Threaded
Casing: 6"	+2'	38'	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4"	0'	60'	160	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) 38'

(7) PERFORATIONS/SCREENS  Perforations Method Saw  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>10'</u>	<u>60'</u>	<u>1/8x8</u>	<u>42</u>			<input type="checkbox"/>	<input checked="" type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian  
Yield gal/min 25 GPM Drawdown \_\_\_\_\_ Drill stem at 60' Time 1 Hr.  
Temperature of water 59° 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 (legal description)  
County Jackson  
Tax Lot 700 Lot \_\_\_\_\_  
Township 36 S Range 2 W WM  
Section 25b SW 1/4 NE 1/4  
Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Street Address of Well (or nearest address) 380 W. Gregory Rd.,  
Central Point, Or

(10) STATIC WATER LEVEL  
23 ft. below land surface. Date 6-27-05  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES  
Depth at which water was first found 38'

From	To	Estimated Flow Rate	SWL
<u>38'</u>	<u>51'</u>	<u>25 GPM</u>	<u>23'</u>

(12) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Soil, Brown	0	2	
Conglomerate, Brown	2	13	
Clay, Brown	13	22	
Gravel with Clay Beds, Brown	22	60	23'

**RECEIVED**  
**JUL 11 2005**  
WATER RESOURCES DEPT  
SALEM, OREGON  
Date Started 6-27-05 Completed 6-27-05

(unbonded) Water Well Constructor Certification  
I certify that the work I performed on the construction, deepening, 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.

WWC Number 1207 Date 6-27-05  
Signed [Signature]

(bonded) Water Well Constructor Certification  
I accept responsibility for the construction, deepening, 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.

WWC Number 1207 Date 6-27-05  
Signed [Signature]