# JACK 58248

Jack 58240

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

**WELL I.D. # L** 79078

**START CARD #** 169597

**Instructions for completing this report are on the last page of this form.** Original Start card 176044

**(1) LAND OWNER** Well Number
Name Dee Copley
Address PO Box 1055
City Medford State OR Zip 97501

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

**(3) DRILL METHOD**
☐ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☒ Other Dual packer w/ water pressure

**(4) PROPOSED USE**
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

**(5) BORE HOLE CONSTRUCTION** Special Construction: ☐ Yes ☐ No
Depth of Completed Well ____ ft. No change
Explosives used: ☐ Yes ☐ No Type ____ Amount ____

| BORE HOLE Diameter | From | To | SEAL Material | From | To | Sacks or Pounds |
|---|---|---|---|---|---|---|
| | | | | | | |
| | | | | | | |
| | | | | | | |

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** No change

| | Diameter | From | To | Gauge | Steel | Plastic | Welded | Threaded |
|---|---|---|---|---|---|---|---|---|
| Casing: | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |
| Liner: | | | | | ☐ | ☐ | ☐ | ☐ |
| | | | | | ☐ | ☐ | ☐ | ☐ |

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

**(7) PERFORATIONS/SCREENS** No change
☐ Perforations Method
☐ Screens Type Material

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

**(8) WELL TESTS: Minimum testing time is 1 hour**
☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| 5.06 gpm | still dropping | | 4hr |

Temperature of water 64 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 2702 Lot
Township 34S N or S Range 1E E or W WM
Section 34 SE 1/4 SE 1/4
Lat ___°___'___" or _____ (degrees or decimal)
Long ___°___'___" or _____ (degrees or decimal)
Street Address of Well (or nearest address) 9542 Farrington Rd

**(10) STATIC WATER LEVEL**
157 ft. below land surface. Date 10/10/06
____ ft. below land surface. Date
Artesian pressure ____ lb. per square inch Date

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

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| | | | |
| | | | |
| | | | |
| | | | |

**(12) WELL LOG** Ground Elevation

| Material | From | To | SWL |
|---|---|---|---|
| Hydrofracturing | 147 | 252 | |
| packer locations | 252 | 357 | |
| | 257 | 462 | |
| | 462 | 567 | |
| | 567 | bottom | |

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WATER RESOURCES DEPT
SALEM, OREGON

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WATER RESOURCES DEPT
SALEM, OREGON

Date Started 10/10/06 Completed 10/10/06

**(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 Date
Signed

**(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 1374 Date 11-12-06
Signed

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WELL ID # L 79078

(START CARD) # 176044

# WATER SUPPLY WELL REPORT

required by ORS 537.765

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

## (1) OWNER:

Permit number:

Name Copley

Address PO Box

City Medford State OR Zip 97501

## (2) TYPE OF WORK:

(repair/recondition) Abandonment

Cable Auger

Community Industrial Irrigation

Injection Livestock Other

## (3) DRILL METHOD:

## (4) PROPOSED USE:

## (5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 920 ft.

Explosives used Yes No Type Amount

| HOLE Diameter | From | To | SEAL Material | From | To | Amount sacks or pounds |
|---|---|---|---|---|---|---|
| 10 | 0 | 38 | bentonite | 0 | 38 | 11 sacks |
| 6 | 38 | 920 | | | | |

How was seal placed: Method A B C D E

Other poured 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 | +2 | 38 | 250 | X | | X | |
| Liner: | | | | | | | | |

Final location of shoe(s)

## (7) PERFORATIONS/SCREENS:

Perforations Method

Screens Type Material

| From | To | Slot size | Number | Diameter | Tele/pipe size | Casing | Liner |
|---|---|---|---|---|---|---|---|
| | | | | | | | |

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

Pump Bailer Air Flowing Artesian

| Yield gal/min | Drawdown | Drill stem at | Time |
|---|---|---|---|
| .5 | 920 | 920 | 1 hr. |

Temperature of Water 64 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 34S N or S Range 1E E or W of WM

Section 34 SE 1/4 SE 1/4

Tax lot 2702 Lot Block Subdivision

Street Address of Well (or nearest address) 9542 Farrington road

## (10) STATIC WATER LEVEL:

427 ft. below land surface Date 10/8/2005

Artesian pressure lb. per square inch. Date

## (11) WATER BEARING ZONES:

Depth at which water was first found 500

| From | To | Estimated Flow Rate | SWL |
|---|---|---|---|
| 38 | 500 | .5 | 427 |

## (12) WELL LOG:

Ground elevation

| Material | From | To | SWL |
|---|---|---|---|
| tan ash | 0 | 6 | |
| pumice-red | 6 | 31 | |
| grey claystone | 31 | 163 | |
| red claystone | 163 | 198 | |
| grey claystone | 198 | 461 | |
| grey basalt | 461 | 627 | |
| red claystone | 627 | 704 | |
| grey basalt | 704 | 819 | |
| grey claystone | 819 | 920 | 427 |

ASHLAND DRILLING INC.
ALL AMERICAN PUMPS
600 South Pacific Hwy
Talent, OR 97540
541 488 3827

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WATER RESOURCES DEPT
SALEM, OREGON

Date started 10/4/2005 Completed 10/8/2001

**(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 my best knowledge and belief.

WWC Number 1697

Signed Date 1/19/2006

Ashland Drilling Inc.

**(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.

WWC Number 1478

Signed Date 1/19/2006

Ashland Drilling Inc.

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