

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

WELL I.D. # 91987

START CARD # 194516

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

(1) LAND OWNER Well Number _____
Name U.S. FOREST SERVICE
Address PO Box 520
City Medford State OR Zip 97501

(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 218 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
12"	0	22	CEMENT	0	22	14
8"	22	38				
6"	38	218				

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

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	6"	+2	38	2-50	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Liner:	4 1/2"	-4	218	2-2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 33 1/2'

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type FACTORY Material PVC

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
-198	218	.052				<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
572		200'	1hr

Temperature of water 68° 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 N/A Lot _____
Township 39 No. 03 Range 03 E or W WM
Section 28 1/4 _____ 1/4 _____
Lat 42° 9' 06" N or 9 016 N (degrees or decimal)
Long 123° 35' 22" W or 123.5922 W (degrees or decimal)
Street Address of Well (or nearest address) STAR RAULER STA. ON UPPER APPLEGATE RD.

(10) STATIC WATER LEVEL
+2 ft. below land surface. Date 10-31-07
_____ ft. below land surface. Date _____
Artesian pressure 02 lb. per square inch Date 10-31-07

(11) WATER BEARING ZONES

Depth at which water was first found 90'

From	To	Estimated Flow Rate	SWL
90	218	6 gpm	+2'

(12) WELL LOG Ground Elevation 1575'

Material	From	To	SWL
CLAY TOPSOIL	0	2 1/2	
BROWN CLAY	2 1/2	7	
BROWN CLAY SILT	7	12	
GRAY-GREEN GRANITE	12	7	
SILTSTONE + QUARTZ		218	+2'

RECEIVED
NOV 08 2007
WATER RESOURCES DEPT
SALEM, OREGON

Date Started 10-29-07 Completed 10-31-07

(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 1739 Date 10-31-07
Signed Cholly Fry

(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 1355 Date 10-31-07
Signed Arthur J. Fry