

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

WELL I.D. # L 101286

START CARD # 1007319

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

(1) LAND OWNER Well Number _____
Name **LaQuinta (Jay Kemble)**
Address **434 S. Valley View Rd**
City **Ashland** State **Or** Zip **97520**

(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 **201** ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
10"	0	58	Cement	0	58	20 sacks
6"	58	201				

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 _____

Casing/Liner	Diameter	From	To	Gauge	SEAL			
					Steel	Plastic	Welded	Threaded
Casing: 6"	+2	58	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Liner: 4"	0	201	Sch 40	<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) **58**

(7) PERFORATIONS/SCREENS
 Perforations Method **Saw**
 Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
101	201	1/8x8	100			<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
40 GPM		201	1 Hr.

Temperature of water **52°** 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 **501** Lot _____
Township **38** S Range **1** E WM
Section **32** 1/4 1/4

Lat **42° 13' 31"** or _____ (degrees or decimal)
Long **122° 44' 22"** or _____ (degrees or decimal)

Street Address of Well (or nearest address) **same as #1**

(10) STATIC WATER LEVEL
48 ft. below land surface. Date **7-21-09**
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found **126**

From	To	Estimated Flow Rate	SWL
125	194	40 GPM	48

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Soil, Black	0	3	
Conglomerate, Brown	3	18	
Clay, Brown	18	38	
Sandstone, Grey	38	201	48

Medina Well Drilling, Inc.
(541) 866-8010
3266 Hampton St.
Central Point, OR 97502

Date Started **7-20-09** Completed **7-21-09**

(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 **1857** Date **7-21-09**
Signed *Ronald J. Wankler*

(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 **7-21-09**
Signed *Josquin Medina*

AUG 10 2009

