JACK 61112

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 104429

START CARD # 206543

(1) LAND OWNER

Owner Well I.D. _____

First Name Dr Alan Last Name Kadish
Company
Address 6455 NW Concord Drive
City Corvallis State OR Zip 97330

(2) TYPE OF WORK

☐ New Well ☐ Deepening ☐ Conversion
☒ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD

☐ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☒ Other hydrofracture

(4) PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/ Commericial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)
Depth of Completed Well 510 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/ lbs
6	0	510					

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☐ Other
Backfill placed from ft. to ft. Material
Filter pack from ft. to ft. Material Size
Explosives used: ☐ Yes Type Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s)
Temp casing ☐ Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method
Screens Type Material

Perf/Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size

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

○ Pump ○ Bailer ◉ Air ○ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
6	510	510	4

Temperature 59 °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below)

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County JACKSON Twp 38 S N/S Range 2 W E/W WM
Sec 7 1/4 of the 1/4 Tax Lot 601
Tax Map Number Lot
Lat ° ' " or 42.28203 DMS or DD
Long ° ' " or -122.9801 DMS or DD
◉ Street address of well ○ Nearest address

1036 Sterling Cr Rd

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening	01-31-2012		☐	94
Completed Well	02-03-2012		☐	62

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 94

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
02-03-2012	94	510	6		☐	62
					☐	
					☐	
					☐	
					☐	

(11) WELL LOG

Ground Elevation

Material	From	To
packer set max pressure 1200psi	430	510
packer set max pressure 800psi	350	430
packer set max pressure 700psi	270	350
packer set max pressure 400psi	190	270
increased production from .1 gpm to 6 gpm		

Date Started 01-31-2012 Completed 02-03-2012

(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.

License Number 1478 Date 02-05-2012
Password : (if filing electronically)
Signed

RECEIVED
FEB 08 2012
WATER RESOURCES DEPT
SALEM, OREGON

(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 State water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 1478 Date 02-05-2012
Password : (if filing electronically)
Signed
Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK

Form Version: 0.95