JACK 61135

04-14-2012

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

WELL LABEL # L	108489
START CARD #	1015909

(1) LAND OWNER Owner Well I.D.	(0) I OCATION OF WELL (logal description)		
	(9) LOCATION OF WELL (legal description)		
First Name DORIS Last Name ROOT	County Jackson Twp 36.00 S N/S Range 1	.00 W E/W WM	
Company	Sec <u>20</u> <u>NW</u> 1/4 of the <u>SW</u> 1/4 Tax Lor	1 300	
Address PO BOX 430 City MEDFORD State OR Zip 97501	Tax Map Number Lot	D) (6 DD	
1 <u>9/301</u>	Lat "or or or	DMS or DD	
(2) TYPE OF WORK New Well Deepening Conversion	Long ci	DMS or DD	
Alteration (repair/recondition) Abandonment	Street address of well Nearest address		
(A) DDILL METHOD	7338 HWY 62 WHITE CITY, OR 97503		
(3) DRILL METHOD Rotary Air Rotary Mud Cable Auger Cable Mud			
	(10) STATIC WATER LEVEL Date SWI (psi)		
Reverse Rotary Other	Date SWL(psi)	+ SWL(ft)	
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening Completed Well 02-22-2012		
Industrial/ Commercial Livestock Dewatering	1 02-22-2012		
Thermal Injection Other	,		
	WATER BEARING ZONES Depth water was first fo		
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	SWL Date From To Est Flow SWL(p		
Depth of Completed Well 160.00 ft. BORE HOLE SEAL sacks/	02-22-2012 83 136 80	16	
BORE HOLE SEAL sacks/ Dia From To Material From To Amt lbs			
10 0 23 Bentonite Chips 0 23 17 S			
10 0 25 Bentomic Chips 0 25 17 S			
6 23 160	(11) WELL LOG Ground Flavotion		
	Ground Elevation		
How was seal placed: Method A B C D E	Material From	то То	
Other Dry Poured	Lt Brown Clay & Cobble 0	15	
Backfill placed from ft. to ft. Material	Brown Clay & Mixed Gravel		
Filter pack from 30 ft. to 160 ft. Material Co Sil Sand Size 8/12	Brown Clay & Mixed Gravel 15	24	
Explosives used: Yes Type Amount	Blue Claystone Med Hard 24	42	
(6) CASING/LINER	2	72	
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Dark Grey Claystone 42	96	
€ 6✓ 1.5✓ 38.5✓ .250✓ .250			
$\bigcirc \qquad \boxed{ \qquad \qquad } \boxed{ \qquad \qquad } \boxed{ \qquad \qquad } \boxed{ \qquad \qquad } \boxed{ \qquad } $	LT Grey Claystone 96	143	
	Med. Grey Claystone		
	ivied. Grey Claystone 14:	3 155	
	Blue/Green Claystone 155	5 160	
Shoe Inside Outside Other Location of shoe(s) 38.5		TYV	
Temp casing Yes Dia From To			
(7) PERFORATIONS/SCREENS			
Perforations Method Factory Lazer Cut			
Screens Type Material			
Perf/S Casing/ Screen Scrn/slot Slot # of Tele/	Dete Started		
Perf/S Casing/ Screen			
Perf Liner 140 160 .032 1 3,115	(unbonded) Water Well Constructor Certification		
	I certify that the work I performed on the construction, dee		
	abandonment of this well is in compliance with Oregon construction standards. Materials used and information repo		
	the best of my knowledge and belief.	ited above are true to	
(8) WELL TESTS: Minimum testing time is 1 hour	, .	10	
. ,	License Number 1504 Date 04-14-201 Electronically Filed	12	
Pump Bailer Air Flowing Artesian	Signed <u>CHARLIE GILL (E-filed)</u>		
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)			
80 160 2	(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		
Temperature 55 °F Lab analysis Yes By	performed during this time is in compliance with Orego	n water supply well	
Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.		
From To Description Amount Units	License Number 1835 Date 04-14-2012		
·	Electronically Filed		
	Signed KEVIN D GILL (E-filed)		
	Contact Info (optional) Clouser Drilling Inc.	Contact Info (optional) Clouser Drilling Inc.	