

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

WELL I.D. # L 102946

START CARD # 1016557

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

(1) **LAND OWNER** Well Number _____
 Name **JACKSON COUNTY ROADS AND PARKS**
 Address **7520 TABLE ROCK RD.**
 City **CENTRAL POINT** State **OR.** Zip **97502**

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

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
6"			CEMENT	61	38	5 SACKS

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							
Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: N/C				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
Liner: 4"	0	38	160 PSI	☐	☒	☒	☐
				☐	☐	☐	☐

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

(7) **PERFORATIONS/SCREENS**
☒ Perforations Method **SAW**
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
10	38	1/8X8	40			☐	☒
						☐	☐
						☐	☐
						☐	☐

(8) **WELL TESTS: Minimum testing time is 1 hour**
☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian
 Yield gal/min **12 GPM** Drawdown **38** Drill stem at **2 HOURS**

Temperature of water **58** 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: **40 / 60**

(9) LOCATION OF WELL (legal description)

County **JACKSON**
 Tax Lot **1600** Lot _____
 Township **36** S Range **2** W WM
 Section **19** 1/4 1/4
 Lat **42** ° **25** ' **51** " or _____ (degrees or decimal)
 Long **122** ° **58** ' **37** " or _____ (degrees or decimal)

Street Address of Well (or nearest address) **BEHIND 7700 TOLO RD.**
CENTRAL POINT

(10) STATIC WATER LEVEL

12 ft. below land surface. Date **5-11-12**
 _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

From	To	Estimated Flow Rate	SWL
		12 GPM	12

(12) WELL LOG

Material	From	To	SWL
CEMENT FROM 61 TO 38			
PRESSURE GROUT			
SEAL OFF BOTTOM ZONE			
WAITING FOR LAB RESULTS			12
SALTY / BORON			
Medina Well Drilling, Inc. (541) 664-6339 3286 Highway 210 Central Point, OR 97502			
RECEIVED JUN 05 2012 WATER RESOURCES DEPT SALEM, OREGON			

Date Started **5-7-12** Completed **5-11-12**

(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 **1207** 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 **1207** Date **7-16-12**

Signed *Joey Medina*