Revisions Requested

JACK 61311

10/26/2012

WELL I.D. LABEL# L 109596
START CARD # 1017565
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name RICK Last Name BOTHWELL
Company
Address 11620 SUNSET RD
City MONTAGUE State CA Zip 96064

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion ☐ Alteration (complete 2a & 10) ☐ Abandonment(complete 5a)

(2a) PRE-ALTERATION

	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
Casing:									

	Material	From	To	Amt	sacks/lbs
Seal:					

(3) DRILL METHOD

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

(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 100.00 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/lbs
10	0	19	Bentonite Chips	0	19	750	P
6	19	100					

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

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
●	○	6	☒	1	19	.250	●	○		
○	●	4	☐	0	100	.250	○	●	☒	
○	○		☐				○	○		
○	○		☐				○	○		
○	○		☐				○	○		

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

(7) PERFORATIONS/SCREENS

Perforations Method saw cut
Screens Type Material

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Liner	4	0	100	.188	5	90	

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

○ Pump ○ Bailer ◉ Air ○ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
40		100	1
40		100	1

Temperature 55 °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS amount

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County JACKSON Twp 36.00 S N/S Range 3.00 W E/W WM
Sec 12 NE 1/4 of the NW 1/4 Tax Lot 100
Tax Map Number Lot
Lat ° ' " or DMS or DD
Long ° ' " or DMS or DD
○ Street address of well ◉ Nearest address
CORNER OF SHILO AND BEGAL RD, WHITE CITY OR 97523

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	8/28/2012			20

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 50.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
8/28/2012	50	85	40			20

(11) WELL LOG

Ground Elevation

Material	From	To
soil	0	7
claystone blue	7	100

Date Started 8/28/2012 Complete 8/28/2012

(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 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.

License Number 1661 Date 10/26/2012

Signed BRAD MILKOWSKI (E-filed)

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: