

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

JACK 62585
JACK 62585
 5/20/2016

WELL I.D. LABEL# L 119600
 START CARD # 1030412
 ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D. _____
 First Name CHRISTIAN Last Name RODGERS
 Company _____
 Address 6075 BRAINARD RD. PEPPER PIKE
 City CLEVELAND State OH Zip 44124

(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/ Commercial Livestock Dewatering
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)
 Depth of Completed Well 280.00 ft.
BORE HOLE **SEAL** sacks/lbs

Dia	From	To	Material	From	To	Amt	lbs
10	0	18	Bentonite	0	18	8	S
6	18	280				8	
						Calculated	
						Calculated	

How was seal placed: Method A B C D E
 Other POURED
 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
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	<input checked="" type="checkbox"/>	2	18	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	4	<input type="checkbox"/>	5	280	sch40	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

 Shoe Inside Outside Other Location of shoe(s) 18
 Temp casing Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS
 Perforations Method saw cut
 Screens Type _____ Material _____

Perf/ Screen	Casing/ Liner	Dia	From	To	Scrnm/slot width	Slot length	# of slots	Tele/ pipe size
Perf	Liner	4	80	100	.1	5	34	
Perf	Liner	4	200	220	.1	5	34	
Perf	Liner	4	240	260	.1	5	34	

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
3		280	2

 Temperature 56 °F Lab analysis Yes By _____
 Water quality concerns? Yes (describe below) TDS amount 250 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)
 County JACKSON Twp 35.00 S N/S Range 4.00 W E/W WM
 Sec 36 NW 1/4 of the NWSE 1/4 Tax Lot 300
 Tax Map Number _____ Lot _____
 Lat _____ " or _____ DMS or DD
 Long _____ " or _____ DMS or DD
 Street address of well Nearest address
4181 WARDS CREEK RD. NROGUE RIVER, OR 97537

(10) STATIC WATER LEVEL

Existing Well / Pre-Alteration	Date	SWL(psi)	+ SWL(ft)
Completed Well	4/28/2016		40

 Flowing Artesian? Dry Hole?
 WATER BEARING ZONES Depth water was first found 78.00

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
4/28/2016	78	79	1		40
4/28/2016	112	113	1		40
4/28/2016	188	189	1		40

(11) WELL LOG Ground Elevation _____

Material	From	To
brown clay	0	10
basalt (med)	10	112
basalt w/quartz	112	122
basalt (med)	122	183
basalt w/quartz	183	201
basalt (hard)	201	280

This report was originally e-filed to the Department; the original e-filed document is attached.

Date Started 4/28/2016 Completed 4/28/2016

(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 1878 Date 5/20/2016
 Signed KERRY SCHATTENKERK (E-filed)

(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 1284 Date 5/20/2016
 Signed DOUG P SCHATTENKERK (E-filed)
 Contact Info (optional) Southern Oregon Water Wells 541-672-7834

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

JACK 62585
JACK 62585

5/20/2016

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 42.482559 Datum: WGS84

Longitude: -123.121582

Township/Range/Section/Quarter-Quarter Section:

WM 6S 2W 34 NWNW

Address of Well:

4181 WARDS CREEK RD.
ROGUE RIVER, OR 97537

Well Label: 119600

Printed: May 20, 2016

DISCLAIMER: This map is intended to represent the approximate location for the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

