					Page 1 of 1
STATE OF OREGON	JACK	62965	WELL I.D. LABEL# I	L 125241	
WATER SUPPLY WELL REPORT			START CARD #	1033879	
(as required by ORS 537.765 & OAR 690-205-0210)	4/6/2	2017	ORIGINAL LOG #		
(1) LAND OWNER Owner Well I.D.					
First Name ANTHONY Last Name TINGHITELLA	•			• • • •	
Company			TON OF WELL (legal d		
Address 621 DATE PALM RD.			<u>Twp 38.00 S N</u>		
		Sec 27	<u>SW</u> 1/4 of the <u>NE</u>	1/4 Tax Lo	it <u>211</u>
$\underbrace{City VERO BEACH}_{(2) \text{ TYPE OF WORK}} \underbrace{State FL}_{New Well} \underbrace{Zip 32963}_{Deepening} Conv$	varsion	Tax Map Numb	ber	Lot	
(2) TYPE OF WORK \times		Lat°	or		DMS or DD
Alteration (complete 2a & 10) Abandonment(co	omplete 5a)	Long °	" or <u>-122.921490</u>	000	DMS or DD
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd			reet address of well Ne	arest address	Diab of DD
			LANE MEDFORD, OR 9750		
Material From To Amt sacks/lbs			EARLE WEED ORD, OR 9750	L	
Seal:					
(3) DRILL METHOD		(10) STATI	C WATER LEVEL		
X Rotary Air Rotary Mud Cable Auger Cable Mud		(10) 0 11111	Date	e SWL(psi)	+ SWL(ft)
		Existing W	Vell / Pre-Alteration		
Reverse Rotary Other		Completed			26
(4) PROPOSED USE X Domestic Irrigation Community	/		Flowing Artesian?		
Industrial/Commericial Livestock Dewatering		WATER BEAR	-	-	
Thermal Injection Other			I		
		SWL Date	From To Est	Flow SWL(p	osi) + SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	3/30/2017	50 70	14	26
Depth of Completed Well <u>340.00</u> ft.		3/30/2017	218 220	2	26
BORE HOLE SEAL	sacks/	0,00,2011			
Dia From To Material From To A	Amt lbs				
	23 S				
6 39 340 Calculated	17.8				
		(11) WELL	IOC		
Calculated			Ground Elevatio	n <u>3085.00</u>	
How was seal placed: Method A B C D	E		Material	From	То
X Other DRY POURED			CLAY MEDIUM SOFT	0	-
Backfill placed from ft. to ft. Material			BASALT MEDIUM	32	
Filter pack from ft. to ft. Material Size		DARK GREY	BASALT HARD	82	2 340
Explosives used: Yes Type Amount					
(5a) ABANDONMENT USING UNHYDRATED BENTONI	TE				
Proposed Amount Actual Amount					
(6) CASING/LINER					
Casing Liner Dia + From To Gauge Stl Plstc					
$\bullet \qquad \bigcirc \qquad 6 \qquad \boxed{\mathbf{X}} \qquad 2 \qquad 98 \qquad .250 \qquad \boxed{\bullet} \qquad \bigcirc$					
$\bigcirc \ \bullet \ 4 \ \square \ 2 \ 340 \ \text{Sch } 40 \ \bigcirc \ \bullet$					
Shoe Inside \mathbf{X} Outside Other Location of shoe(s) 98	3				
Temp casing Yes Dia From + To					
(7) PERFORATIONS/SCREENS Perforations Method AIR/SAW CUT					
Screens Type Material		Data Ctartad	2/28/2017	1.4.1.2/20/2	017
Perf/ Casing/ Screen Scrn/slot Slot # of	Tele/	Date Started	<u>5/28/2017</u> Com	pleted <u>3/30/2</u>	.017
Screen Liner Dia From To width length slots		(unbonded) W	ater Well Constructor Certifi	ication	
Perf Casing 6 50 70 .188 1 480		I certify that t	he work I performed on the co	onstruction, de	epening, alteration, or
Perf Liner 4 60 100 .188 4 120		abandonment	of this well is in complianc	e with Orego	n water supply well
Perf Liner 4 320 340 .188 4 60		construction st	andards. Materials used and in	formation repo	orted above are true to
		the best of my	knowledge and belief.		
		License Numb	er 1994 D	ate 3/30/2017	7
(8) WELL TESTS: Minimum testing time is 1 hour					<u>.</u>
		Signed SHA	WN PETERSON (E-filed)		
\bigcirc Pump \bigcirc Bailer \bigcirc Air \bigcirc Flowing A	r				
Yield gal/min Drawdown Drill stem/Pump depth Duration (I	hr)	. ,	er Well Constructor Certificat		
16 340 1			nsibility for the construction, d		
			d on this well during the constru		
			ing this time is in compliance		
Temperature 55 °F Lab analysis Yes By		construction sta	andards. This report is true to the	e best of my k	nowledge and belief.
	ppm	License Numbe	er 1835 Da	ate 3/30/2017	
Water quality concerns? Yes (describe below) TDS amount 215 From To Description	Units			2.20,2017	
		Signed KEV	'IN D GILL (E-filed)		
	↓	Contact Info (o	ptional) CLOUSER DRILLING	G INC.	
ODICINAL WATED DE	SOUDCES DI	DADTMENT			

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