

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

JACK 63110**7/26/2017**

WELL I.D. LABEL#	126759
START CARD #	1035500
ORIGINAL LOG #	

(1) LAND OWNER

Owner Well I.D. _____

First Name THOR Last Name THOMPSON
Company BUTTE CREEK RANCH LLC
Address 1485 BROWNSBORO MERIDIAN ROAD.
City EAGLE POINT State OK Zip 97524

(2) TYPE OF WORK
☒ New Well ☐ Deepening ☐ Conversion

☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)
(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrld
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 CONSTRUCTIONSpecial Standard ☐ (Attach copy)Depth of Completed Well 306.00 ft.

BORE HOLE			SEAL			sacks/lbs	
Dia	From	To	Material	From	To	Amt	lbs
10	0	19	Bentonite Chips	0	19	9	S
6	19	306				Calculated	8
						Calculated	

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other DRY 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	Thrld
<input checked="" type="checkbox"/>	<input type="checkbox"/>	6	<input checked="" type="checkbox"/>	1	19	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input checked="" type="checkbox"/>	4	<input type="checkbox"/>	6	306	sch 40	<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"/>

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____Temp casing ☐ Yes Dia _____ From + _____ To _____**(7) PERFORATIONS/SCREENS**Perforations Method skillsaw

Screens Type		Material					
Perf/	Casing/ Screen	Dia	From	To	Scrn/slot width	Slot length	# of slots
Perf	Liner	4	246	286	.032	2	6400
Perf	Liner	4	286	306	.175	4	16

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

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
35		305	4

Temperature 63 °F Lab analysis ☒ Yes By Nielson Lab
Water quality concerns? ☐ Yes (describe below) TDS amount 302 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)County JACKSON Twp 36.00 S N/S Range 1.00 E E/W WMSec 6 NE 1/4 of the NE 1/4 Tax Lot 1700

Tax Map Number _____ Lot _____

Lat _____ " or 42.47357380 DMS or DD

Long _____ " or -122.74223593 DMS or DD

☒ Street address of well ☐ Nearest address
1485 BROWNSBORO MERIDIAN ROAD. EAGLE POINT OREGON 97524**(10) STATIC WATER LEVEL**

Existing Well / Pre-Alteration	Date	SWL(psi)	+	SWL(ft)
Completed Well	7/26/2017			33
Flowing Artesian?				
Dry Hole?				

WATER BEARING ZONESDepth water was first found 125.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
7/26/2017	125	285	35			33

(11) WELL LOGGround Elevation 1443.00

Material	From	To
Top Soil, black sticky clay.	0	5
Basalt, Blue, Med Hard.	5	60
Sand Stone, Blue grey	60	120
Sand Stone, Blue grey, W/ quartz	120	130
Sand Stone, Blue grey	130	270
Sand Stone, Dark blue, w/ quartz	270	306

Date Started 7/26/2017 Completed 7/26/2017**(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 1798 Date 7/26/2017Signed GARY NEWMAN (E-filed)Contact Info (optional) Southern Oregon Well Drilling Inc. 541-772-1177

ORIGINAL - WATER RESOURCES DEPARTMENT

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

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

JACK 63110

7/26/2017

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: 42.4735738005 Datum: WGS84

Longitude: -122.7422359339

Township/Range/Section/Quarter-Quarter Section:

WM 36S 1E 6 NENE

Address of Well:

1485 BROWNSBORO MERIDIAN ROAD. EAGLE POINT OREGON 97524

Startcard: 1035500

Printed: July 26, 2017

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

Provided by well constructor

