

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

JACK 63757

4/8/2019

WELL I.D. LABEL# L 133117
START CARD # 1042217
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name Last Name
Company ROYAL ORDER OF THE MOOSE #178
Address 9713 OLD STAGE RD.
City GOLD HILL State OR Zip 97525

(2) TYPE OF WORK

[X] 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

[X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE

[] Domestic [] Irrigation [X] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION

Depth of Completed Well 200.00 ft. Special Standard [] (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Row 1: 10, 0, 21, Bentonite Chips, 0, 21, 16, S. Row 2: 6, 21, 200, Calculated, 9.58.

How was seal placed: Method [] A [] B [] C [] D [] E
[X] 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

Table with columns: Casing, Liner, Dia, +, From, To, Gauge, Stl, Plstc, Wld, Thrld. Row 1: 6, 2, 61, .250, [X]. Row 2: 4, 3, 200, SCH40, [X].

Shoe [] Inside [X] Outside [] Other Location of shoe(s) 61

Temp casing [] Yes Dia From + To

(7) PERFORATIONS/SCREENS

Perforations Method SAWCUT

Table with columns: Perf/ Screen, Casing/ Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/ pipe size. Row 1: 4, 180, 200, .188, 4, 60.

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

[] Pump [] Bailer [X] Air [] Flowing Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Row 1: 15, 198, 1.5.

Temperature 55 °F Lab analysis [] Yes By

Water quality concerns? [] Yes (describe below) TDS amount 176 ppm

Table with columns: 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 22 NE 1/4 of the SW 1/4 Tax Lot 400

Tax Map Number Lot

Lat " or 42.42458200 DMS or DD

Long " or -123.04465400 DMS or DD

[X] Street address of well [] Nearest address

9713 OLD STAGE RD. GOLD HILL, OR 97525

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Pre-Alteration, Date, SWL(psi), SWL(ft). Row 1: Completed Well, 3/21/2019, 15, 23.

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES

Depth water was first found 63.00

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), SWL(ft). Row 1: 3/21/2019, 63, 132, 15, 23.

(11) WELL LOG

Ground Elevation

Table with columns: Material, From, To. Row 1: TAN TIGHT CLAY, 0, 22. Row 2: BRN CLAY MXD GRAVL COBBLE CRS SAND, 22, 56. Row 3: GREY BASALT BROKEN, 56, 132. Row 4: GREY BASALT HARD, 132, 200.

Date Started 3/21/2019 Completed 3/21/2019

(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 1945 Date 3/28/2019

Signed JUSTIN SPLIETHOF (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 1835 Date 4/8/2019

Signed KEVIN GILL (E-filed)

Contact Info (optional) CLOUSER DRILLING INC.