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

JACK 64220

11/11/2019

WELL I.D. LABEL# L 135576
START CARD # 1045438
ORIGINAL LOG #

(1) LAND OWNER

Owner Well I.D.
First Name DAVE Last Name DUDDY
Company
Address 5128 BEAGLE RD.
City WHITE CITY State OR Zip 97503

(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 220.00 ft.

BORE HOLE

Dia	From	To
12	0	18
8	18	220

SEAL

Material	From	To	Amt	sacks/lbs
Bentonite Chips	0	18	18	S
		Calculated	16.02	
		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	Thrd
●	○	8	☒	1	19	.250	●	○		
○	●	6	☐	2	220	SCH40	○	●		
○	○		☐				○	○		
○	○		☐				○	○		
○	○		☐				○	○		

Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 19
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	6	200	220	.188	6	60	

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

○ Pump ○ Bailer ◉ Air ○ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
120		218	1.5

Temperature 54 °F Lab analysis ☐ Yes By
Water quality concerns? ☐ Yes (describe below) TDS amount 214 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County JACKSON Twp 35.00 S N/S Range 2.00 W E/W WM
Sec 11 SW 1/4 of the SE 1/4 Tax Lot 700
Tax Map Number Lot
Lat ° ' " or 42.53809000 DMS or DD
Long ° ' " or -122.90104000 DMS or DD
◉ Street address of well ○ Nearest address
5128 BEAGLE RD. WHITE CITY OR 97503

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	10/30/2019			41

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 54.00

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
10/30/2019	54	56	4			41
10/30/2019	116	118	22			41
10/30/2019	157	161	94			41

(11) WELL LOG

Ground Elevation 1032.00

Material	From	To
BROWN CLAY MIXED GRAVEL	0	3
BROWN SANDSTONE MEDIUM	3	7
GRAY BLUE SANDSTONE HARD	7	76
GRAY SANDSTONE MED/HARD	76	167
GRAY GREEN SANDSTONE MED/HARD	167	220

Date Started 10/29/2019 Completed 10/30/2019

(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 11/6/2019

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 11/11/2019

Signed KEVIN GILL (E-filed)

Contact Info (optional) CLOUSER DRILLING INC.

ORIGINAL - WATER RESOURCES DEPARTMENT

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