STATE OF OREGON WATER SUPPLY WELL REPORT

JACK 65393

6/16/2022

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

			I age I	OI I
L	114220			
	1050157			
	JACKSON	64494		

(as required by ORS 537.	545 & 537.765 and OAR 690	0-205-0210)	6/16/	2022	ORIGINAL LOG	# JACKSON	64494	
1) LAND OWNER	Owner Well I.D.							
First Name ANDREA	Last Name COOF	ζ	·	(9) LOCATION	OF WELL (lega	al description	n)	
Company				County JACKSON	Twp 37.00 S	_N/S Range	2.00 W	E/W WM
Address PO BOX 5111 C:tv: CENTRAL POINT	State OR 7	Zip 97502		Sec <u>28 NW</u>	1/4 of the <u>SE</u>	1/4 Tax	Lot <u>3800</u>	
City CENTRAL POINT 2) TYPE OF WORK	New Well Deepe	ening Conver	rsion	Tax Map Number Lat°		Lot _		
Z) TITE OF WORK	ation (complete 2a & 10)	Abandonment(com		Lat°	or 42.32352	2000		DMS or DD
2a) PRE-ALTERATION		•	iprete ou)	Long	or <u>-122.943</u>	33000		DMS or DD
Casing: 6 X 2					\sim	Nearest address	3	
				4425 W. MAIN ST. I	MEDFORD OR 9750	1		
Material Seal:	From To Amt sa	CKS/IDS						
3) DRILL METHOD				(10) STATIC W	ATER LEVEL			
X Rotary Air				Date SWL(psi) + SWL(ft)				
Industrial/ Commericial	$=$ $=$ \cdot				_		_	
Thermal Injection	_	-		WATER BEARING Z		n water was first		
				SWL Date Fro	om To	Est Flow SWI	_(psi) +	SWL(II)
5) BORE HOLE CONST		ial Standard (At	ttach copy)	12/2/2020	14 25	8		8
Depth of Completed We BORE HOLE		EAL	1/				—— <u> </u> _	
Dia From To		om To An	sacks/ nt lbs		l			
10 0 14	Bentonite Chips 0	14 10	0 S				—— -	
6 14 53		Calculated 6.3	39			<u> </u>		
		Calculated		(11) WELL LOG	Ground Elev	ation		
How was seal placed:	 Method		E	Mate	Oround Elev	Fro		To
Other NOT DISTURBE			ுட	PULLED PUMP EQU			0	53
	ft. to ft. Mat	erial		INSTALLED NEW I			0	53
	ft. to 53 ft. Material S			FILTER PACKED W			0	53
	Type Amou			SPEC STAND APPR	VD FOR JACK 6449	4	0	53
5a) ABANDONMENT U								
Proposed Amount	Actual An		L					
6) CASING/LINER								
Casing Liner Dia	+ From To Ga	uge Stl Plstc W	/ld Thrd					
6		250 (•) ()	\times					
4	3 53 SC	H40						
			\perp					
$A \rightarrow A \rightarrow$		- R-A	\dashv \vdash					
Shoe Inside (Outside Other Locat	ion of shoe(s)						
Temp casing Yes Dia								
· • —	From +	To						
Perforations Perforations	REENS Method Lazer Cut							
Screens Type		nterial	_	Date Started 12/2/2	020 Co	ompleted 12/2	2/2020	
Perf/ Casing/ Screen	Scrn/slot	Slot # of	Tele/					
	From To width		pipe size	I certify that the wo	Well Constructor Cer		daananina	alteration of
Perf Casing 6 Perf Liner 4	14 25 .188 3 53 .032	1 216 1 7790			s well is in compli			
TOTI Elliot 4	3 33 .032	1 7750			ls. Materials used an			
				the best of my knowl	edge and belief.			
				License Number		Date		
3) WELL TESTS: Minim	um testing time is 1 hour	r		Signed				
O Pump O Bai	iler	Flowing Art						
	Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)			(bonded) Water Wel	ll Constructor Certif	ication		
8	8 53 1			I accept responsibilit				
				work performed on this well during the construction dates reported above. All worl performed during this time is in compliance with Oregon water supply wel				
Tomporoture 50 OF	Lab analysis Yes By	ı		construction standard				
· —	Yes (describe below) TD		ppm	License Number 183	_	Date 6/16/202	_	
Water quality concerns? Yes (describe below) TDS amount 370 ppm From To Description Amount Units						0/10/202	<u>~</u>	
				Signed KEVIN GI				
		+	$\overline{}$	Contact Info (optiona	l) Clouser Drilling In	c.		
				<u> </u>				