						Page 1 of 2
STATE OF OREGON	JACK	65640	WELL I.D. LABEL	# L 14929	<b></b> €7	
WATER SUPPLY WELL REPORT	011011	00010	START CARD	# 10594	430	
	12/16/	/2022	ORIGINAL LOG	#		
(as required by ORS 537.545 & 537.765 and OAR 690-205-0210) (1) I AND OWNER				<u> </u>		
(1) LAND OWNER Owner Well I.D First Name Last Name C		(A) = 0 (A) =				
Company KIMMEL FAMILY FOUNDATION			ION OF WELL (lega			
Company KIMMEL FAMILY FOUNDATION		County JACKS	ON Twp <u>36.00</u> S	N/S R	ange_1.00	W E/W WM
Address 81 PINE CT.		Sec 30	SE 1/4 of the NE	1/4	Tax Lot 50	1
City EAGLE POINT State OR Zip 97524   (2) TYPE OF WORK X New Well Deepening Conversion	<u> </u>	Tax Map Numb			Lot	
(2) TYPE OF WORK X <sup>New Well</sup> Deepening Conve	ersion	Lat °	er or <u>42.41455</u> or <u>-122.856</u>	100		DMS or DD
Alteration (complete 2a & 10) Abandonment(com	mplete 5a)	Lat	" or 122.856	75000		- DMS or DD
(2a) PRE-ALTERATION		Long	OI <u>-122.830</u>	<u>73000</u>		_ DMS of DD
Dia + From To Gauge Stl Plstc Wld Thrd		$\sim$	reet address of well			
Casing:		6779 CRATE	R LAKE HWY CENTRAL P	OINT, OR	Ł	
Material From To Amt sacks/lbs						
Seal:						
(3) DRILL METHOD		(10)  STATE	C WATER LEVEL			
Rotary Air Rotary Mud Cable Auger Cable Mud				ate SW	VL(psi) +	SWL(ft)
Reverse Rotary Other			Vell / Pre-Alteration		↓ [_]	
		Completed				39
(4) <b>PROPOSED USE</b> Domestic Irrigation Community			Flowing Artesian?	_ Dry	y Hole?	
Industrial/ Commericial Livestock Dewatering		WATER BEAR	ING ZONES Depth	water was	s first found	83.00
Thermal Injection Other		SWL Date	-		_	+ SWL(ft)
			110111 10	LSt Plow	3 W L(psi)	· SWL(II)
(5) BORE HOLE CONSTRUCTION Special Standard (A	Attach copy)	12/1/2022	83 90	14.5		39
Depth of Completed Well 200.00 ft.		12/1/2022	163 168	3.5		39
BORE HOLE SEAL	sacks/	12/1/2022	183 187	11		39
Dia From To Material From To A	mt lbs					
	21 S					
6 38 200 Calculated 17	7.34	L			1	
		(11) WELL	IOC			
			Ground Eleva	tion <u>131</u>	0.00	
How was seal placed: Method A B C D	Е		Material		From	То
X Other DRY POURED		BROWN CLA	Y		0	11
Backfill placed from ft. to ft. Material		BROWN CLA	Y & LARGE GRAVEL		11	22
Filter pack from ft. to ft. MaterialSize		TAN CLAY			22	28
		LIGHT TAN C	CLAY		28	31
Explosives used: Yes Type Amount		BLUE/GREY	CLAYSTONE MED		31	67
(5a) ABANDONMENT USING UNHYDRATED BENTONIT	ГЕ	DARK GREY	CLAYSTONE MED		67	72
Proposed Amount Actual Amount		BLUE/GREY	CLAYSTONE MED		72	117
		DARK GREY	CLAYSTONE MED		117	168
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc V	Wid Thed	GREY CLAYS	TONE MED		168	183
$\bigcirc \bigcirc $		DARK GREY	CLAYSTONE MED		183	200
	A + I					
$\bigcirc \ \bullet \ 4 \ \Box \ 3 \ 200 \ \text{Sch40} \ \bigcirc \ \bullet \ $						
Shoe Inside Outside Other Location of shoe(s) $38$ .	.5					
Temp casing Yes Dia From + To						
(7) PERFORATIONS/SCREENS						
Perforations Method Lazer/Saw Cut						
Screens Type Material		Date Started	12/1/2022 Co	mnlatad	12/1/2022	
Perf/ Casing/ Screen Scrn/slot Slot # of	Tele/	Date Started		mpieteu	, 12/1/2022	
	pipe size	(unbonded) W	ater Well Constructor Cer	tification		
Perf Liner 4 163 183 .032 1 3116		I certify that the	he work I performed on the	construct	ion, deepeni	ng, alteration, or
Perf Liner 4 183 200 .188 4 51			of this well is in complia			
			andards. Materials used and	l informati	on reported	above are true to
		the best of my	knowledge and belief.			
		License Numb	er 2009	Date 12	2/9/2022	
(8) WELL TESTS: Minimum testing time is 1 hour	· · · · · · · · · · · · · · · · · · ·					
		Signed JAS	ON KLIPFEL (E-filed)			
$\bigcirc$ Pump $\bigcirc$ Bailer $\bigcirc$ Air $\bigcirc$ Flowing Ai						
Yield gal/min Drawdown Drill stem/Pump depth Duration (h	r)	(bonded) Wate	er Well Constructor Certifi	cation		
29 200 1.5		I accept respor	sibility for the construction	, deepenir	ng, alteration	, or abandonment
			d on this well during the cons			
			ing this time is in compli			
Temperature 54 °F Lab analysis Yes By		construction sta	undards. This report is true to	o the best of	of my knowle	edge and belief.
	ppm	License Numbe	er 1835	Date 12/1	16/2022	
Water quality concerns? Yes (describe below) TDS amount 208 From To Description Amount	Units		1033	12/1	10/2022	
		Signed KEV	IN GILL (E-filed)			
			ptional) 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: New exempt use wells must be submitted with a map and recording fee.

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

**JACK 65640** 

12/16/2022

Map of Hole

## STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

## LOCATION OF WELL

Latitude: 42.41455100 Datum: WGS84 Longitude: -122.85675000 Township/Range/Section/Quarter-Quarter Section: WM36.00S1.00W30SENE Address of Well: 6779 CRATER LAKE HWY CENTRAL POINT, OR

## Oregon Water Resources Department

725 Summer St NE, Salem OR 97301 (503)986-0900



## Well Label: 149297 Printed: December 9, 2022

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

