WELL I.D. LABEL# L $_{153948}$ STATE OF OREGON **JACK 66223** START CARD# 1073621 WATER SUPPLY WELL REPORT 6/19/2024 ORIGINAL LOG# (as required by ORS 537.545 & 537.765 and OAR 690-205-0210) (1) LAND OWNER Owner Well I.D. WELL #3 First Name THOULFEKAR Last Name AIRAHEM (9) LOCATION OF WELL (legal description) Company County JACKSON Twp 38.00 S N/S Range 2.00 W E/W WM Address 7117 GRIFFIN LANE Sec <u>27</u> SW 1/4 of the <u>NE</u> 1/4 Tax Lot <u>211</u> City MEDFORD State OR Zip 97501 Tax Map Number _ × New Well Deepening Conversion (2) TYPE OF WORK or 42.23976500 Alteration (complete 2a & 10) Abandonment(complete 5a) " or -122.92132900 DMS or DD (2a) PRE-ALTERATION Street address of well Nearest address Stl Plstc Wld Thrd Gauge 7117 GRIFFIN LN, MEDFORD OR 97501 Material From To Amt sacks/lbs Seal: (10) STATIC WATER LEVEL (3) DRILL METHOD SWL(psi) SWL(ft) X Rotary Air Rotary Mud Cable Existing Well / Pre-Alteration Reverse Rotary Other Completed Well Domestic X Irrigation Flowing Artesian? Dry Hole? (4) PROPOSED USE Industrial/ Commericial Livestock Dewatering Depth water was first found 230.00 WATER BEARING ZONES Thermal | Injection Other SWL Date + SWL(ft) To Est Flow SWL(psi) From (5) BORE HOLE CONSTRUCTION Special Standard (Attach copy 5/28/2024 230 Depth of Completed Well 1040.00 ft. 5/28/2024 448 457 1.5 37 BORE HOLE **SEAL** sacks 5/28/2024 553 567 2 37 Dia From Material From To Amt lbs 10 58 58 29 0 Bentonite Chips 0 S Calculated 26.47 6 (11) WELL LOG Ground Elevation 3103.25 FT Seal placement method A B C D E Other: DRY POURED From То Material Brown clay & weathered Applegate group 0 Backfill placed from _____ ft. to ____ ft. Material__ 17 Tan clay & weathered Applegate group _ ft. to _____ ft. Material Filter pack from _ Weath Applegate grp & grey Applegate grp 37 Explosives used: Type Grey Applegate group medium 37 196 Seal Placement Begin Date 5/20/2024 Begin Time 11 30 Dark grey Applegate group medium 196 391 (5a) ABANDONMENT USING UNHYDRATED BENTONITE 761 Grey Applegate group medium 391 761 859 Actual Amount Dark grey Applegate group medium Proposed Amount Grey Applegate group medium 1040 (6) CASING/LINER Mat. Shoe Type Wld Thrd Shoe Location From Gauge C .250 STOUT. 58 Yes Dia Temp casing (7) PERFORATIONS/SCREENS Perforations Method Construction End Date 5/28/2024 Begin Date 5/17/2024 Screens Type _ Material Begin Time 09 Perf/ Casing/ Screen Scrn/slot Slot # of Tele/ (unbonded) Water Well Constructor Certification Screen Liner From length slots Pipe size 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 2009 Date 6/3/2024(8) WELL TESTS: Minimum testing time is 1 hour JASON KLIPFEL (E-filed) Drill Stem/ Duration Yield Drawdown Pump Depth (hr) (bonded) Water Well Constructor Certification Type of Test (gal/min)

ORIGINAL - WATER RESOURCES DEPARTMENT

1040

ppm

License Number 1835

Signed KEVIN GILL (E-filed) Drilling Company: Clouser Drilling Inc.

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.

Date 6/19/2024

3.8

°F Lab analysis Yes By

Yes (describe below) TDS amount 150

Air

Water quality concerns?
From To

Temperature 55

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

Yield

(gal/min)

Type of Test

Duration

(hr)

Drill Stem/

Drawdown Pump Depth

66223	WELL I.D. LABEL# L 153948					
		START CA		107362	1	
2024		IGINAL L	OG#			
Water Qua From	llity Concert	ns Descrip	otion		Amou	nt Units
		Beserip	, tion			
10) STAT	IC WATE	R LEVEL				
SWL Date	From	То	Est F	low SV	VL(psi)	+ SWL(ft)
4) TY/FIT T	TOG					
1) WELI	LOG Material			F	rom	То
				_		
	() 1 .	. 1 23		1.70		11 / 77 1
	on(s) who assis	sied with cons	ıructioi	n and Tra Type	inee Lice	ense # / Helpe #
GREG ELLI		WAT	ΓER	Турс		1989
JARED HO		WAT		2095		
MIKE MCD		PER W	8888846			
Commerci	s/Remarks					
Permit: G 18						
. ormit. O 10	<i>y</i>					

6/19/2024

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

Printed: June 3, 2024

Well Label: 153948



LOCATION OF WELL

Latitude: 42.23976500 Datum: WGS84

Longitude: -122.92132900

Township/Range/Section/Quarter-Quarter Section:

WM38.00S2.00W27SWNE

Address of Well:

7117 GRIFFIN LN, MEDFORD OR 97501

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

