

JOSE 13189

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36S/5W-22ad

STATE OF OREGON WATER WELL REPORT (as required by ORS 537.765)

(START CARD) #

(1) OWNER:

Name Dennis Becklin, Well Number UN 08 1988, Address 3560 Rogue River Hwy, City Grants Pass, State OR, Zip 97526

(2) TYPE OF WORK:

New Well, Deepen, Recondition, Abandon

(3) DRILL METHOD

Rotary Air, Rotary Mud, Cable, Other

(4) PROPOSED USE:

Domestic, Community, Industrial, Irrigation, Thermal, Injection, Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No, Depth of Completed Well 100 ft., Explosives used Yes No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Amount sacks or pounds

How was seal placed: Method A B C D E, Other

Backfill placed from ft. to ft. Material, Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded, Casing, Liner

(7) PERFORATIONS/SCREENS:

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Table with columns: Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water, Depth Artesian Flow Found, Was a water analysis done?, Did any strata contain water not suitable for intended use?, Depth of strata

(9) LOCATION OF WELL by legal description:

County Josephine, Latitude, Longitude, Township 36S, N or S, Range 5W, E or W, WM, Section 22, SE 1/4 NE 1/4, Tax Lot, Lot, Block, Subdivision, Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:

20 ft. below land surface, Date 5-9-88, Artesian pressure lb. per square inch, Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Table with columns: Material, From, To, SWL

Date started 5-9-88, Completed 5-9-88

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed [Signature], WWC Number 1447, Date 6-6-88

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed [Signature], WWC Number 1319, Date 6-6-88

"START CARD"  
NOTICE OF BEGINNING OF WELL CONSTRUCTION  
(as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and Mailing Address Dennis Beckley  
3560 Rogue River Hwy  
Grants Pass, OR 97526

Proposed Commencement Date 5/4/88

MAY 4 1988

Proposed Well Depth 150' +/-, Diameter 6"

and Use:  Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Other

Proposed Well Location: County Josephine  
Township 36 (N or S) Range 05 (E or W) Section 22

At least 2 of these must be provided

- SE 1/4 of NE 1/4 of above section
- street address of 3560 Rogue River Hwy  
Grants Pass, OR 97526
- tax lot number of well location 1602
- attach approved map with location identified.  
(see reverse of this form for approved maps)

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

X \_\_\_\_\_  
Owner's Signature

X Randall E. Mueller  
Bonded Water Well Constructor

\_\_\_\_\_  
Title

License No. 1379

\_\_\_\_\_  
Date

Company Vic Durden Well Drilling

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.