

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

14 JOSE RECEIVED  
 17655 MAY 25 1995

38S/5W/26CC  
 (START CARD) # N/A

Instructions for completing this report are on the last page of this form.

(1) OWNER:

Name FRED BOYCE  
 Address 19741 WILLIAMS HWY  
 City GRANTS PASS State OR Zip 97527

Well Number \_\_\_\_\_ SALEM, OREGON

(9) LOCATION OF WELL by legal description:

County JOSEPHINE Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
 Township 38S N or S Range 5W E or W. WM.  
 Section 26 SW 1/4 SW 1/4  
 Tax Lot 1402 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
 Street Address of Well (or nearest address) 19741 WILLIAMS HWY

(2) TYPE OF WORK

New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:

Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:

Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:

Special Construction approval  Yes  No Depth of Completed Well \_\_\_\_\_ ft.  
 Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
10	0	20	CEMENT	0	20	8
6	20	180				

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:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6	0	100	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
5	0	180	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

Perforations Method TORCH  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
100	180	1/4 x 8	200	5	5	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>

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

Pump  Bailor  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
45	140		1 hr.

Temperature of water 50? Depth Artesian Flow Found \_\_\_\_\_

Was a water analysis done?  Yes By whom \_\_\_\_\_

Did any strata contain water not suitable for intended use?  Too little

Salty  Muddy  Odor  Colored  Other \_\_\_\_\_

Depth of strata: \_\_\_\_\_

(10) STATIC WATER LEVEL:

20 ft. below land surface. Date 5-13-95  
 Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found 40

From	To	Estimated Flow Rate	SWL
40	50		
160	180		

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
CLAY + Boulders	0	120	
Boulder + Gravel	120	180	
CEMENTED			
CUSTOMER SEEMS TO REMEMBER MOST OF WHAT HAPPENED WHILE WE DRILLED WELL.			

Date started 1985 Completed 1985

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

Signed Paul Post WWC Number 599 Date 5-13-95

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.

Signed Paul Post WWC Number 599 Date 5-13-95