

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the

STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

WATER WELL REPORT

STATE OF OREGON
(Please type or print)

(Do not write above this line)

RECEIVED

OCT 27 1972

State Well No.

365/6W-26

STATE ENGINEER
SALEM, OREGON

Permit No.

N.C.
Jose
4337

(1) OWNER:

Name Kennit Jackson
Address 2400 Wolf Ln. Grants Pass, Ore

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) CASING INSTALLED:

Threaded Welded
6" Diam. from 0 ft. to 41 ft. Gage 750
" Diam. from ft. to ft. Gage
" Diam. from ft. to ft. Gage

(6) PERFORATIONS:

Perforated? Yes No
Type of perforator used
Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name
Type Model No.
Diam. Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? Driller
Yield: 25 gal./min. with 27 ft. drawdown after 1 hrs.
" " " " " "
" " " " " "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.

Temperature of water 50 Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used Cement
Well sealed from land surface to 35 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in.
Number of sacks of cement used in well seal 5 sacks
Number of sacks of bentonite used in well seal sacks
Brand name of bentonite
Number of pounds of bentonite per 100 gallons of water lbs./100 gals.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: ft.
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Josephine Driller's well number
1/4 1/4 Section 26 T. 76-SR. 6W. W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 44 ft.
Static level 8' ft. below land surface. Date 9/13/72
Artesian pressure lbs. per square inch. Date 0

(12) WELL LOG:

Diameter of well below casing 6
Depth drilled 52 ft. Depth of completed well 52 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

| MATERIAL | From | To | SWL |
|------------------------------|-----------|-----------|-----------|
| <u>CLAY Brn</u> | <u>0</u> | <u>12</u> | <u>—</u> |
| <u>CLAY Brn - Gravel med</u> | <u>12</u> | <u>44</u> | <u>—</u> |
| <u>Gravel lng - Sandy</u> | <u>44</u> | <u>52</u> | <u>8'</u> |
| <u>A Quifer</u> | <u>44</u> | <u>52</u> | |

Work started 9/13 19 72 Completed 9/13 19 72
Date well drilling machine moved off of well 9/13 19 72

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.

[Signed] C. J. Overstreet Date 10/25, 19 72
(Drilling Machine Operator)

Drilling Machine Operator's License No. 472

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

Name JA Quin Drilling Co.
(Person, firm or corporation) (Type or print)

Address 1840 Willow Ln. Grants Pass

[Signed] C. J. Overstreet
(Water Well Contractor)

Contractor's License No. 576 Date 10/25, 19 72

WELL IDENTIFICATION FORM **JOSE 4337**

Owner's Well Number: _____

CURRENT WELL OWNER:

Phone 471-1523

Name: Charlotte & Jack Hennessy

Mailing Address: 2400 Wolf Lane

City: Grants Pass State: OR Zip: 97527

WELL LOCATION:

County: Josephine Latitude: _____ Longitude: _____

Township: 36 N or S Range: 06 E or W Section: 26 NW 1/4 NE 1/4

Tax Lot Number: 1501

Street Address of Well (if different from above): _____

If a well report is available for this well, please attach a copy of it to this form and return. It is not necessary for you to complete the remainder of the form if the well report is attached. If a well report is not available, please complete the remainder of the form to the best of your ability.

WELL INFORMATION:

Start Card Number: _____ Approx. Construction Date: _____

Well Constructor: _____

Name of Owner at Time of Construction: _____

Well Depth (in feet): _____ Static Water Level (in feet): _____

Diameter of Exposed Well Casing (in inches): _____

Does this well have a formal water right associated with it? Yes: _____ No: _____ If yes:

Application #: _____ Permit #: _____ Certificate #: _____

Please Return Completed Form to: Oregon Water Resources Department
158 12th Street NE
Salem, OR 97310

(Office use only)

Well Identification Number: 13184

RECEIVED
MAR - 3 1997
WATER RESOURCES DEPT.
SALEM, OREGON