14

Jose 45552

36S/6W/23 cb

STATE OF OREGON

WATER WELL REPORT

(as required by ORS 537.765)

(START CARD) # 31163

(1) OWNER:

Well Number:

Name: Bill Deakins

Address: P O Box 5537

City: Grants Pass State: OR Zip: 97527

(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 75 ft.

Explosives used Yes ☐ No ☒ Type Amount

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
10	0	22	Cement	0	22	9 sacks
6	22	75				

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	+2	60	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) 60

(7) PERFORATIONS/SCREENS:

☐ Perforations Method

☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
105		75	(1 hr.)

Temperature of water 52 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:

(9) LOCATION OF WELL by legal description:

County Joseph Latitude ' " Longitude ' "

Township 36 N or S. Range 6W E or W. WM.

Section 23 NW ¼ SW ¼

Tax Lot 1900 Lot Block Subdivision

Street Address of Well (or nearest address)

2778 Redwood Avenue

(10) STATIC WATER LEVEL:

3 ft. below land surface. Date 9-9-91

Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 60

From	To	Estimated Flow Rate	SWL
60	70	105	3

(12) WELL LOG:

Ground elevation

Material	From	To	SWL
Brown clay	0	3	
Brown clay, small gravel	3	15	
Gray clay, sm-med gravel	15	58	
Decomposed granite, black & white, soft	58	75	3

RECEIVED

SEP 26 1991

WR. DIST. 14

GRANTS PASS, ORE.

Date started 9-9-91 Completed 9-9-91

(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.

WWC Number 1462

Signed Michael Pierce Date 9-9-91

(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.

WWC Number 675

Signed Bob Gunn Date 9-12-91