

JOSE 50603

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LOG 256

STATE OF OREGON WATER SUPPLY WELL REPORT

NOV 22 1996

(START CARD) # 90718

(as required by ORS 537.765)

WATER RESOURCES DEPT. SALEM, OREGON

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

(1) OWNER:

Name: Three Rivers School District
Address: 520 Detrick Dr
City: Grants Pass State: Ore Zip: 97520

(2) TYPE OF WORK

Alteration (repair/recondition) checked

(3) DRILL METHOD:

Rotary Air checked

(4) PROPOSED USE:

Domestic checked

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well
Explosives used Yes No Type Amount

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

How was seal placed: Method A B C D E

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 for Casing and Liner

Final location of shoe(s)

(7) PERFORATIONS/SCREENS:

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

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

Table with columns: Pump, Bailer, Air, Flowing Artesian, Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water 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: JO Latitude Longitude
Township: 37S N or S Range: low E or W. WM.
Section: 12 SW 1/4 SW 1/4
Tax Lot: 4200 Lot Block Subdivision
Street Address of Well: 520 Detrick Dr Grants Pass Ore

(10) STATIC WATER LEVEL:

ft. below land surface. Date
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. Includes handwritten note: Extended Casing from Below Ground Level to above ground level add 5' of well casing

Date started 10-25-96 Completed 10-25-96

(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.

Signed: [Signature] WWC Number 1648 Date 10-25-96

(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.

Signed: Charles B Pelkey WWC Number 1298 Date 10-25-96