

JOSE 60126

WELL I.D. LABEL# L
START CARD #
ORIGINAL LOG #

116398
213714

- (1) LAND OWNER Owner Well I.D.
First Name Larry Last Name Boucher
Company _____
Address 3731 Coyote Cr Rd
City Wolf Creek State OR Zip 97497
(2) TYPE OF WORK ☒ New Well ☐ Deepening ☐ Conversion
☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

- (2a) **PRE-ALTERATION**
- | | Dia | + | From | To | Gauge | Stl | Plstc | Wld | Thrd |
|---------|----------|---|------|----|---------------|-------------------------------------|-------------------------------------|--------------------------|--------------------------|
| Casing: | | | | | | ☒ | ☒ | ☐ | ☐ |
| | Material | | From | To | Amt sacks/lbs | | | | |
| Seal: | | | | | | | | | |

- (3) **DRILL METHOD**
☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☐ Other

- (4) PROPOSED USE** ☒ Domestic ☐ Irrigation ☐ Community
☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering
☐ Thermal ☐ Injection ☐ Other

- (5) **BORE HOLE CONSTRUCTION** Special Standard ☐ (Attach copy)
Depth of Completed Well 300 ft.

BORE HOLE			SEAL				sacks/ lbs
Dia	From	To	Material	From	To	Amt	
10	0	18	Bentonite	0	18	9	
					Calculated	450	165
6	18	300					
					Calculated		

How was seal placed: ☒ A ☐ B ☐ C ☐ D ☐ E
☒ Other Dry Powdered - Hydrated
 Backfill placed from _____ ft. to _____ ft. Material _____
 Filter pack from _____ ft. to _____ ft. Material _____ Size _____
 Explosives used: ☐ Yes Type _____ Amount _____

- | (5a) ABANDONMENT USING UNHYDRATED BENTONITE | | | | |
|--|--------|--------|--------|--------|
| Proposed Amount | Pounds | Actual | Amount | Pounds |

- (6) CASING/LINER**
- | Casing | Liner | Dia | + | From | To | Gauge | Stl | Plstc | Wld | Thrd |
|-------------------------------------|-------------------------------------|-----|--------------------------|------|-----|-------|--------------------------|-------------------------------------|-------------------------------------|--------------------------|
| ☒ | ☐ | 6 | # | 1 | 19 | 250 | ☐ | ☐ | ☒ | ☐ |
| ☐ | ☒ | 4 | ☐ | 1 | 280 | 160 | ☐ | ☒ | ☐ | ☐ |
| ☐ | ☐ | | ☐ | | | | ☐ | ☐ | ☐ | ☐ |
| ☐ | ☐ | | ☐ | | | | ☐ | ☐ | ☐ | ☐ |
- Shoe ☐ Inside ☒ Outside ☐ Other Location of shoe(s) 19
- Temp casing ☐ Yes Dia _____ From _____ To _____

- (7) PERFORATIONS/SCREENS
- Perforations Method Lazer Cut
- Screens Type Certilock Material _____
- | Perf/S
creen | Casing/
Liner | Screen
Dia | From | To | Scrn/slot
width | Slot
length | # of
slots | Tele/
pipe size |
|-----------------|------------------|---------------|------|-----|--------------------|----------------|---------------|--------------------|
| | ✓ | 4 | 0 | 280 | 1020 | 2.75 | 3520 | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
3		320	1

Temperature 56 °F Lab analysis ☐ Yes By 12/

Water quality concerns? ☐ Yes (describe below) TDS amount 100

From	To	Description	TDS amount	Amount	Units
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From	To	Description	Amount	Class

- (9) LOCATION OF WELL (legal description)
County Josephine Twp 33 N/S Range 5 E/W WM
Sec 29 SW 1/4 of the SE 1/4 Tax Lot 418
Tax Map Number _____ Lot _____
Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
☒ Street address of well ☐ Nearest address

- (10) STATIC WATER LEVEL**

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration			☐	
Completed Well	6/2/17		☐	30
Flowing Artesian?	☐	Dry Hole?	☐	

WATER BEARING ZONES Depth water was first found 30

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
6-6-17	30	50	2		30
6-7-17	150	160	1		30

- | (11) WELL LOG | | Ground Elevation _____ | |
|---------------------|--|------------------------|-----|
| Material | | From | To |
| Top Soil | | 0 | 12 |
| Tombstone Granite | | 12 | 30 |
| Brown - Black-White | | | |
| Tombstone Granite | | 30 | 300 |
| Black - White | | | |
| | | | |
| | | | |
| RECEIVED BY OWRD | | | |
| | | | |
| JUN 19 2017 | | | |
| | | | |
| SALEM, OR | | | |
| | | | |

Date Started 6-6-17 Completed 6-7-17

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, 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.

License Number 1251 Date 6/14/17

Signed Michael J. Pence

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, 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.

License Number 1251 Date 8/14/17

Signed Michael J. Tsiros

Contact Info (optional)