

WELL I.D. LABEL#	120950
START CARD #	215039
ORIGINAL LOG #	

Company _____
Address PO BOX 2483
City GRANTS PASS State OR Zip 97528

(2a) PRE-ALTERATION

	Dia	+ From To Gauge	Stl Plstc Wld Thrd
Casing:	[] [] [] [] []	[X] [X]	[] [] [] []
	Material	From To Amt sacks/lbs	
Seal:	[] [] [] [] []	[] [] [] [] []	

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

BORE HOLE			SEAL			sacks/
Dia	From	To	Material	From	To	lbs
6	60	400				
d not disturb Seal				Calculated		
				Calculated		

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☐ Other _____
 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	Std	Plstc	Wld	Thrd
			☐							
			☐							
			☐							
			☐							
			☐							
			☐							

Shoe ☐ Inside ☐ Outside ☐ Other Location of shoe(s) _____

Temp casing ☐ Yes Dia _____ From _____ To _____

[illegible]

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

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
8½		399	ONE HR

Temperature 53 °F Lab analysis ☐ Yes By _____
Water quality concerns? ☐ Yes (describe below) TDS amount 123
From To Description Amount Units

From	To	Description	Amount	Cmts

County JOSEPHINE Sup 36S N/S Range 6W E/W WM
Sec 35 NW 1/4 of the SW 1/4 Tax Lot 309
Tax Map Number _____ Lot _____

Lat _____ " or _____ DMS or DD
Long _____ " or _____ DMS or DD
☒ Street address of well ☐ Nearest address

2887 HELGESON LN

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration	10-23-18			40
Completed Well	10/23/18			40
Flowing Artesian?	☐	Dry Hole?	☐	

WATER BEARING ZONES			Depth water was first found		
SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
10/23/18	75	380			40

[illegible]

Date Started 10-18-18 Completed 10-23-18

(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 _____ Date _____

Signed _____

(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 1324 Date 10/25/18
Signed Jim Sublette
Contact Info (optional) Adelman's Well

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.

JOSE 4740
WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

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DEC 23 1974

STATE ENGINEER

SALEM, OREGON

State Well No.

365/6W-35

State Permit No.

T.L. 309

(1) OWNER:

Name ALVA MERRILL
Address 1199 FRED AVE
REDONDA BEACH CALIF.

(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 54 ft. Gage 1250
" 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: 11 gal./min. with 32 ft. drawdown after 1 hrs.

Baller test gal./min. with ft. drawdown after hrs.

Artesian flow g.p.m.

Temperature of water 57° Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal—Material used CEMENT
Well sealed from land surface to 38 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in. 6 1/2
Number of sacks of cement used in well seal 6 1/2 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:
Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Josephine Driller's well number
1/4 1/4 Section 35 T. 36S R. 6W W.M.
Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found 55 ft.
Static level 18' ft. below land surface. Date 12/17/74
Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing 6"
Depth drilled 60 ft. Depth of completed well 60 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>DECOMPOSED GRANITE</u>	<u>0</u>	<u>46</u>	
<u>FAKTESA TAMASTONE</u>			
<u>GRANITE</u>	<u>46</u>	<u>59</u>	<u>18'</u>
<u>TAMASTONE GRANITE</u>	<u>59</u>	<u>60</u>	
<u>Aquifer</u>	<u>55</u>	<u>59</u>	<u>11gpm</u>

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JAN 04 2019

OWRD

Work started 12/9 19 74 Completed 12/9 19 74
Date well drilling machine moved off of well 12/9 19 74

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] D. J. Ouster Date 12/17, 19 74
(Drilling Machine Operator)

Drilling Machine Operator's License No. 810

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 PAQUIN DRILLING CO.
(Person, firm or corporation) (Type or print)

Address 1840 Willow Ln G.P.

[Signed] Paul Quinn
(Water Well Contractor)

Contractor's License No. 574 Date 12-18, 19 74