

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

JOSE 61026

12/8/2020

WELL I.D. LABEL# L 139696
START CARD # 1049981
ORIGINAL LOG #

(1) LAND OWNER
Owner Well I.D.
First Name KURT Last Name SLAMA
Company
Address 137 MONTEREY ST.
City SALINAS State CA Zip 93901

(2) TYPE OF WORK
[X] New Well [ ] Deepening [ ] Conversion
[ ] Alteration (complete 2a & 10) [ ] Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrld
Casing:
Material From To Amt sacks/lbs
Seal:

(3) DRILL METHOD
[X] Rotary Air [ ] Rotary Mud [ ] Cable [ ] Auger [ ] Cable Mud
[ ] Reverse Rotary [ ] Other

(4) PROPOSED USE
[ ] Domestic [ ] Irrigation [X] Community
[ ] Industrial/ Commercial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION
Special Standard [ ] (Attach copy)
Depth of Completed Well 140.00 ft.

Table with columns: Dia, From, To, Material, From, To, Amt, sacks/lbs. Includes rows for Bentonite and Calculated values.

How was seal placed: Method [ ] A [ ] B [ ] C [ ] D [ ] E
[X] Other DRY POURED
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 Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld
Shoe [ ] Inside [X] Outside [ ] Other Location of shoe(s) 49
Temp casing [ ] Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method SAW/SCREEN
Screens Type Material
Perf/ Casing/ Screen Dia From To Scrn/slot width length # of slots Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
[ ] Pump [ ] Bailer [X] Air [ ] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

Table for water quality concerns with columns: From, To, Description, Amount, Units.

(9) LOCATION OF WELL (legal description)
County JOSEPHINE Twp 36.00 S N/S Range 5.00 W E/W WM
Sec 20 SW 1/4 of the SE 1/4 Tax Lot 4300
Tax Map Number Lot
Lat " or 42.42222196 DMS or DD
Long " or -123.31551919 DMS or DD
[ ] Street address of well [X] Nearest address
1205 ROGUE RIVER HWY GRANTS PASS OR 97527

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 11/13/2020 16
Flowing Artesian? [ ] Dry Hole? [ ]

Table for WATER BEARING ZONES with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft).

(11) WELL LOG
Ground Elevation
Material From To
ASPHALT/BASE ROCK 0 2
BROWN CLAY BOULDERS MIXD GRAVEL 2 26
BROWN SILT CLAY MED GRAVEL 26 31
DK BROWN & WHITE GRANITE MEDIUM 31 47
BROWN & WHITE GRANITE MEDIUM 47 112
GREY GRANITE HARD 112 140

Date Started 11/13/2020 Completed 11/13/2020

(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 1835 Date 12/8/2020
Signed KEVIN GILL (E-filed)
Contact Info (optional) Clouser Drilling Inc.

