

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

STATE ENGINEER, SALEM, OREGON 97301 within 30 days from the date of well completion.

RECEIVED STATE OF OREGON SEP 17 1968 STATE ENGINEER SALEM OREGON

WATER WELL REPORT

STATE OF OREGON

Please type or print (Do not write above this line)

Job 325

State Well No. 37/bw-13 D

State Permit No.

NWNW 1300

(1) OWNER:

Name New Hope Mission to Children Address New Hope Road, Grants Pass Or

(2) TYPE OF WORK (check):

New Well [x] Deepening [] Reconditioning [] Abandon []

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary [] Driven [] Cable [x] Jetted [] Dug [] Bored []

(4) PROPOSED USE (check):

Domestic [x] Industrial [] Municipal [] Irrigation [] Test Well [] Other []

CASING INSTALLED:

6" Diam. from 0 ft. to 120 ft. Gage 1/4"

PERFORATIONS:

Perforated? [x] Yes [] No.

Type of perforator used Turb Type Size of perforations 4 in. by 1/4 in. 36 perforations from 115 ft. to 120 ft.

(7) SCREENS:

Well screen installed? [] Yes [x] No

Manufacturer's Name Type Model No. Diam. Slot size Set from ft. to ft.

(8) WATER LEVEL: Completed well.

Static level 5 ft. below land surface Date 7/22/68 Artesian pressure lbs. per square inch Date

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? [] Yes [x] No If yes, by whom? Yield: gal./min. with ft. drawdown after hrs. Bailer test 20 gal./min. with 1/2 ft. drawdown after 2 hrs. Artesian flow g.p.m. Date Temperature of water Was a chemical analysis made? [] Yes [x] No

(10) CONSTRUCTION:

Well seal—Material used Cement Depth of seal 20 ft. Diameter of well bore to bottom of seal 12 in. Were any loose strata cemented off? [] Yes [x] No Depth Was a drive shoe used? [x] Yes [] No Did any strata contain unusable water? [] Yes [x] No Type of water? depth of strata Method of sealing strata off Was well gravel packed? [] Yes [x] No Size of gravel: Gravel placed from ft. to ft.

(11) LOCATION OF WELL:

County Josephine Driller's well number NW 1/4 NW 1/4 Section 13 T. 37S R. 6W W.M. Bearing and distance from section or subdivision corner

(12) WELL LOG:

Diameter of well below casing 6"

Depth drilled 140 ft. Depth of completed well 140 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 as drilling proceeds. Note drilling rates.

Table with columns: MATERIAL, From, To, SWL. Rows include Decomposed Granite (0-120) and Grey Rock (120-140).

Work started 7/15 1968 Completed 7/22 1968 Date well drilling machine moved off of well 7/22 1968

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] [Signature] Date 9-16, 1968 (Drilling Machine Operator)

Drilling Machine Operator's License No. 351

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 Coleman's Well Drilling (Person, firm or corporation) (Type or print)

Address 2060 Vine St

[Signed] Joseph E. Coleman (Water Well Contractor)

Contractor's License No. 360 Date 9-16 1968

For Official Use Only:

Received Date:

County Well Log ID #

Well Identification Tag #

wor's 4-11-03
enf-3-8-04

JOSE 6325

L. 69984

WELL IDENTIFICATION APPLICATION FORM

(please see attached instructions)

RECEIVED

APR 11 2003

WATER RESOURCES DEPT.
SALEM, OREGON

BUYER/CURRENT LANDOWNER (FOR PROPERTY WELL IS LOCATED ON):

Name: New Hope Christian School Inc.

Mailing Address: 5961 New Hope Rd.

City: Grants Pass State: Oregon Zip: 97527 Phone: (541) 476-4588

NOTE: Well Identification Tag will be sent to the above address unless otherwise specified above.

DO NOT COMPLETE THIS FORM IF YOU ARE SHARING THE WELL ON ANOTHER'S PROPERTY.

WELL LOCATION:

County: Josephine Well # (designation owner has given to well if multiple wells exist on same property): 4

Township: 37 North or South Range: 6 East or West Section: 13, NW 1/4 NW 1/4

Tax Lot #: 1304 1300 (not the "tax acct.#") Type of Well: water supply monitoring

Address of Well: 5961 New Hope Rd. Grants Pass Oregon

Does this well have a formal water right associated with it? Yes: No:
(If unknown you may contact the Water Rights Information Group at 503-378-3739 extension 201 for research)

If Yes: Application #: _____ Permit #: _____ Certificate #: _____

(Optional): Latitude _____ Longitude _____ (May sometimes be obtained from Well Log Report)

WELL INFORMATION: (If available, attach copy of driller's well report. If report is not available please complete the following, at a minimum the prior landowner names going back until around the time the well would have been drilled. Prior landowners can be obtained from the County Assessor.)

Start Card #: _____ Approx. Well Construction Date: 7/22/68

Well Constructor: Coleman's Well Drilling

Name of Land Owner at Time of Construction (or list of prior landowners) New Hope mission to Children

Well Depth (in feet): 140 Static Water Level (in feet): 5

Diameter of Exposed Well Casing (in inches): 6

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MAR 12 2003

WATER RESOURCES DEPT.
SALEM, OREGON

Please Return Completed Form to: Well ID Program @ Oregon Water Resources Department
158 12th Street NE - Salem, OR 97301-4172, or fax to 503-378-8130

PREVIOUS WELL ID APPLICATION VERSIONS SHOULD NOT BE USED REVISED: 8-5-02

App No G-15983

L. 69984