JACK 59291

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

WELL I.D. # L 101292

START CARD # 1007767

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

(1) LAND OWNER Well Number _____
Name Mike Malepsy
Address P O Box 1004
City Shady Cove State Or Zip 97539

(2) TYPE OF WORK ☑ New Well
☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion

(3) DRILL METHOD
☑ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud
☐ Other _____

(4) PROPOSED USE
☑ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☑ No
Depth of Completed Well 140 ft.
Explosives used: ☐ Yes ☑ No Type _____ Amount _____

BORE HOLE Diameter	From	To	SEAL Material	From	To	Sacks or Pounds
10"	0	44.5	Cement	0	44.5	23 sacks
6"	44.5	140				

How was seal placed: Method ☐ A ☐ B ☑ C ☐ D ☐ E
☐ Other _____
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	6"	+2	44.5	.250	☑	☐	☑	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	4"	0	140	Sch 40	☐	☑	☐	☑
			Certa	Lok	☐	☐	☐	☐

Drive Shoe used ☐ Inside ☑ Outside ☐ None
Final location of shoe(s) 44.5

(7) PERFORATIONS/SCREENS
☑ Perforations Method Saw
☐ Screens Type _____ Material _____

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
40	60	1/8x8	20			☐	☑
110	140	1/8x8	30			☐	☑
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☐ Pump ☐ Bailer ☑ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
16 GPM		140	1 Hr.

Temperature of water 52° 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: _____

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(9) LOCATION OF WELL (legal description)
County Jackson
Tax Lot 2700 Lot _____
Township 34 S Range 1 W WM
Section 21 _____ 1/4 _____ 1/4
Lat 42 ° 36 ' 7 " or _____.____ (degrees or decimal)
Long 122 ° 49 ' 49 " or _____.____ (degrees or decimal)
Street Address of Well (or nearest address) Next to 550 Bond Rd., Shady Cove, Or

(10) STATIC WATER LEVEL
25 ft. below land surface. Date 8-13-09
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES
Depth at which water was first found 56

From	To	Estimated Flow Rate	SWL
56	133	16 GPM	25

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Soil, Brown	0	1	
Congolmerate, Brown	1	39	
Volcanic Tuff, Grey	39	140	25

Medina Well Drilling, Inc.
(541) 664-6339
3266 Hanley Road
Central Point, OR 97502

Date Started 8-13-09 Completed 8-13-09

(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.

WWC Number 1857 Date 8-17-09
Signed [signature]

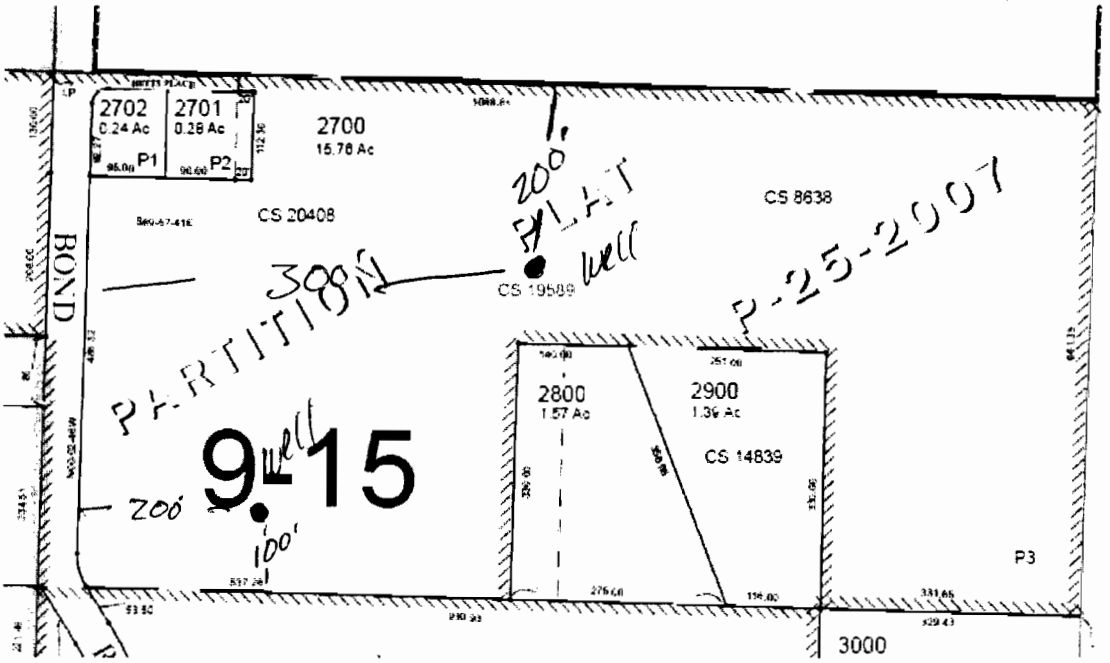
(bonded) Water Well Constructor Certification
I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 1207 Date 8-17-09
Signed [signature]

ORIGINAL – WATER RESOURCES DEPT FIRST COPY – CONSTRUCTOR SECOND COPY – CUSTOMER 06/16/2004

JACK 59291

EXEMPT USE WELL LOCATION MAP



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Jackson County
Assessor Map Reference Number: **31S 1W 21 SENW Tax Lot 2700**
Street Address of Well, if Available: **Next to 550 Bond Road., Shady Cove, OR**
Well Label (ID) # **L 101292**

(Please Locate Well and Indicate distance From Property or Survey Corner, See Attached Sample Well Location Map.)

MAP NOT TO SCALE

LAND OWNER SUBMITTED MAP