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

WELL LABEL # L 105253	
START CARD # 1010831	

(1) LAND OWNER Owner Well l.D	(9) LOCATION OF WELL (legal description)	
First Name MR. ROGER Last Name NICHOLSON	County Klamath Twp 33.00 S N/S Range 7.50 E E/W WM	
Company	Sec 19 NW 1/4 of the NE 1/4 Tax Lot 3800	
Address P.O. BOX 458	Tax Map Number Lot	
City FORT KLAMATH State OR Zip 97626	Lat ° "or DMS or DD	
(2) TYPE OF WORK New Well Deepening Conversion	Long DMS or DD	
	Street address of well Nearest address	
Alteration (repair/recondition) Abandonment		
(3) DRILL METHOD	Corner of Hackler and Nicholson Rd., FORT KLAMATH, OREGON 97626	
Rotary Air Rotary Mud Cable Auger Cable Mud	40.00.00.00.00.00.00.00.00.00.00.00.00.0	
Reverse Rotary Other	(10) STATIC WATER LEVEL Date SWL(psi) + SWL(ft)	
	Existing Well / Predeepening SWE(II)	
(4) PROPOSED USE Domestic Irrigation Community	Completed Well 11-17-2010 1.5 X 3.5	
Industrial/Commericial Livestock Dewatering	Flowing Artesian? Dry Hole?	
ThermalInjectionOther	WATER BEARING ZONES Depth water was first found 2	
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)		
Depth of Completed Well534.00 ft.	07-29-2010 3 38 50 3WE(B)	
BORE HOLE SEAL sacks/	08-03-2010 38 430 2,000 3	
Dia From To Material From To Amt lbs	08-04-2010 430 534 5,000	
24 0 38 Cement 0 518 616 S		
20 38 518		
15 518 534	(11) WELL LOG Ground Flavotion	
How was seal placed: Method A B C D E		
	Material From To Sandy Loam & Cobbles 0 2	
Other	Cilty Dlock Cond	
Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material Size	Stirty Black Sand         2         24           Sticky Silty Sand         24         90	
	Very Fine Black Sand 90 260	
Explosives used:Yes Type Amount	Black Sand & Gray Clay 260 290	
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd	Course Black Sand 290 380	
	Fine Black Sand 380 430	
	Black Sand & Burnt Wood (Charcoal) 430 508	
●       20       ■       1.5       38.5       .250       ●       ○ <td< td=""><td>Fractured Gray Basalt 508 534</td></td<>	Fractured Gray Basalt 508 534	
● 16 118.5 219 .250 ● ○ ○ ○	RECEIVED	
16 219 518 375 S		
Q Q		
Shoe Inside Outside Other Location of shoe(s) 518	JUN 17 2011	
Temp casing Yes Dia From To	WATER READ INDICATE A RESE	
(7) PERFORATIONS/SCREENS	WATER RESOURCES DEPT	
Perforations Method	SALEM, OREGON	
Screens Type Material		
Perf/S Casing/Screen Scm/slot Slot # of Tele/		
creen Liner Dia From To width length slots pipe size	Date Started 07-27-2010 Completed 11-17-2010	
	(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.	
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date	
Pump Bailer Air Flowing Artesian	Electronically Filed	
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed	
860 24	(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		
Temperature 39 °F Lab analysis Yes By 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.		
water quality concerns? The s (describe below)		
From To Description Amount Units License Number 1385 Date 12-06-2010		
	Electronically Filed	
Signed ROBERT BUCKNER (E-filed) Contact Info (optional)		
ORIGINAL - WATER RESOURCES DEPARTMENT THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.95		