

#17

KLAMATH
101745

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

MAY 6 1991

AUTHORIZED
395/12E/35aa
26527

WATER RESOURCES (START CARD) #

(1) OWNER: Well Number: _____
Name Charles Cheyne
Address 10057 E. Langell Valley Rd.
City Bonanza State OR Zip 97623

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 465 ft.
Explosives used Type _____ Amount _____

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
17"	0	171'	Cement	0	171'	130 Sacks
12"	171	230				
8"	230	465				

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 _____

Casing	Diameter	From	To	Gauge	SEAL			
					Steel	Plastic	Welded	Threaded
	12"	0	171	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot Size	Screen Diameter	Tele/pipe size	Casing	Liner
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Flowing Artesian
Yield gal/min 1700 Drawdown 165 Drill stem at _____ Time 1 hr.
1500 155 3 hours
Test By Valley Pump

Temperature of water 54° 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: _____

(9) LOCATION OF WELL by legal description:
County Klamath Latitude _____ Longitude _____
Township 39S N or S. Range 12E E or W, WM.
Section 35 NE 1/4 NE 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
98 ft. below land surface. Date 4-16-91
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 70'

From	To	Estimated Flow Rate	SWL
70'	108'	10 GPM	46'
185'	405'	3,000 GPM	98'

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Soil	0	5	
Brown Sandstone	5	20	
Brown Shale	20	26	
Hard Brown Sandstone	26	48	
Hard Brown Shale	48	70	
Light Brown Clay	70	108	
Blue Clay	108	120	
Brown Shale	120	129	
Hard Blue Sandstone	129	165	
Hard Gray Basalt	165	185	
Broken Basalt W.B.	185	290	98'
Softer Brown Rock	290	295	98'
Hard Basalt	295	337	98'
Brown Basalt	337	395	98'
Brown Basalt & Sand (W.B.)	395	405	98'
Blue Shale	405	465	

Date started 4-2-91 Completed 4-16-91

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.
Signed M. Melnick WWC Number 1452
Date 4-30-91

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.
Signed John Hancock WWC Number 613
Date 4-30-91

STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 657.785)

Klamath
20364

DEC 23 1991

40s/13E/200
 PROPOSED

(START CARD) # W-26536

(1) OWNER: Well Number: 3
 Name Richard A. Smith
 Address 10166 E. Langell Vly. Rd.
 City Bonanza State OR. Zip 97623

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 524 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount
Diameter	From To	Material	From To	sacks or pounds
20"	0 129	Cement	0 129	95 Sacks
16"	129 270			
12"	160 315			
10"	315 440			
8"	440 524			

How was seal placed? 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: 16"	+1	129	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of sheets: _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Beller Air Flowing Artesian
 Yield gal/min 1900 Drawdown 184' Drill stem at _____ Time 1 hr.
Test pumped by Valley Pump.
 Temperature of water 68 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: _____

(9) LOCATION OF WELL by legal description:
 County Klamath Latitude _____ Longitude _____
 Township 40S N or S Range 13E E or W, WM.
 Section 2 NE W NE W
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 10166 E. Langell Vly. Rd.

(10) STATIC WATER LEVEL:
 _____ 16 ft. below land surface. Date 9/4/91
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 22'

From	To	Estimated Flow Rate	SWL
245'	524'	1900 GPM	16'

(12) WELL LOG: Ground elevation _____

Material	From	To	SWL
Sandy Soil	0	3	
Brown Sandstone	3	16	
Yellow Clay	16	22	
Brown Sandstone & Clay	22	55	
Coarse Brown Sandstone	55	80	
Yellow Claystone	80	124	
Grey Basalt	124	150	
Brick Red Rock	150	172	
Grey Basalt	172	245	
Grey Basalt w/Sandy Clay	245	265	16'
Blue Rock & Clay	265	280	16'
Blue Clay	280	295	16'
Brown Clay & Pumice	295	305	16'
Blue Clay	305	375	16'
Hard Black & Brown rock	375	524	16'

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 JUL 25 2014
 SALEM, OR

Date started 7/30/91 Completed 11/14/91

(unbonded) Water Well Constructor Certification:
 I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed Michael W. Smith WWC Number 1452
 Date 12/8/91

(bonded) Water Well Constructor Certification:
 I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.

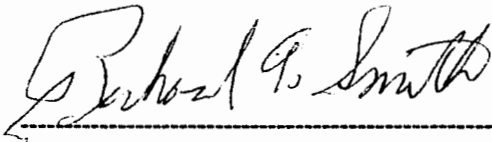
Signed John Kennedy WWC Number 693
 Date 12/8/91

Well agreement between Richard A. Smith and Henry C.G. Cheyne.

It is agreed that Henry C.G. Cheyne will have access and sole use of the irrigation well (Klam 10364) owned by Richard A. Smith for the 2014 irrigation season (May 1 – October 1).

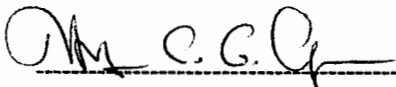
Well location: NE1/4 NE1/4 Section 2, T 40S, R 13E WM, 40 feet south and 275 feet west from the NE corner, Section 2.

Henry C.G. Cheyne agrees to pay all electrical bills and all maintenance costs associated with the well (Klam 10364) for the 2014 irrigation season.



Date 2-19-2014

Richard A. Smith



Date 2-19-2014

Henry C.G. Cheyne

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JUL 25 2014

SALEM, OR