

State of Oregon  
 Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem, Oregon 97301-1266  
 (503) 986-0900

## Application for Water Right Temporary or Drought Temporary Transfer Part 1 of 5 – Minimum Requirements Checklist

**This temporary transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.**  
 For questions, please call (503) 986-0900, and ask for Transfer Section.

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### FOR ALL TEMPORARY TRANSFER APPLICATIONS

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**Check all items included with this application. (N/A = Not Applicable)**

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Temporary Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: [http://apps.wrd.state.or.us/apps/misc/wrd\\_fee\\_calculator](http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator). If you have questions, call Customer Service at (503) 986-0801.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Transferred Water Rights: **How many water rights are to be transferred? 2 List them here: Cert 27103 + G-12450**  
 Please include a separate Part 5 for each water right. (See instructions on page 6)
- N/A For standard Temporary Transfer (one to five years) **Begin Year** \_\_\_\_ **End Year** \_\_\_\_.
- N/A Temporary Drought Transfer (Only in counties where the Governor has declared drought)

**Attachments:**

- Completed Temporary Transfer Application Map. ✓
- \*   N Completed Evidence of Use Affidavit and supporting documentation. ✓
- \*   N Current recorded deed for the land **from** which the authorized place of use is temporarily being moved. ✓
- \*   N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of a district. Complete when the temporary transfer applicant is not the district.
- N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation (if necessary to convey water to the proposed place of use).

**(For Staff Use Only)**  
**WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):**  
 \_\_\_ Application fee not enclosed/insufficient      \_\_\_ Map not included or incomplete  
 \_\_\_ Land Use Form not enclosed or incomplete  
 \_\_\_ Additional signature(s) required      \_\_\_ Part \_\_\_\_ is incomplete  
 Other/Explanation \_\_\_\_\_  
 Staff: \_\_\_\_\_ 503-986-0 \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

## Part 2 of 5 – Temporary Transfer Application Map Checklist

Your temporary transfer application will be returned if any of the map requirements listed below are not met.

Please be sure that the temporary transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed temporary place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- N/A If you are proposing a change in point(s) of diversion or well(s) to convey water to the new temporary place of use, show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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**Part 4 of 5 – Applicant Information and Signature**

**Applicant Information**

APPLICANT/BUSINESS NAME <i>Robert Unruh</i>		PHONE NO. <i>541-891-8360</i>	ADDITIONAL CONTACT NO.
ADDRESS <i>30083 Pickett</i>			FAX NO.
CITY <i>Malin</i>	STATE <i>OR</i>	ZIP <i>97632</i>	E-MAIL
<p><b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b></p>			

**Agent Information** – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.
CITY	STATE	ZIP	E-MAIL
<p><b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b></p>			

Explain in your own words what you propose to accomplish with this transfer application; and why:  
*DUE TO DROUGHT, TRANSFERING WR TO LAND THAT WILL BE FARMER AND IRRIGATION DISTRICT CANNOT PROVIDE WATER*  
 If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

**I (we) affirm that the information contained in this application is true and accurate.**

<i>Robert Unruh</i> Applicant signature	<i>Robert A Unruh</i> Print Name (and Title if applicable)	<i>4-17-18</i> Date
<i>Cheri A Unruh</i> Applicant signature	<i>Cheri A Unruh</i> Print Name (and Title if applicable)	<i>4-17-18</i> Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located?  Yes  No

If NO, include signatures of all landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) has been conveyed.

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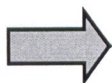


Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

DISTRICT NAME <i>Shasta View Irrigation</i>	ADDRESS	
CITY	STATE	ZIP

Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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## INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please **save the application form to your computer**. Unlock the document by using one of the following instructions for your Microsoft Word software version:

### Microsoft Word 2003

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;
- OR**
- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the **Tools** menu => click **Protect Document**;
- OR**
- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

### Microsoft Word 2007

- Unlock the document by clicking the **Review** tab, then click **Protect Document**, then click **Stop Protect**
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

### Microsoft Word 2010

- Unlock the document by clicking the **Review** tab; toggle the **Restrict Editing icon** at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the “**Allow only this type of editing in the document: Filling in forms**” in the “Editing restrictions” section on the right-hand list of options.
- To relock the document, check the **Editing Restrictions/Allow Only This Type of Editing/Filling In Forms** box from the drop-down menu, then check **Yes, Start Enforcing Protection**. You do not need to assign a password for the editing restrictions.

### Other Alternatives:

- Photocopy pages or tables in Part 5, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

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## Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

### Description of Water Delivery System

System capacity: 0.49 cubic feet per second (cfs) **OR**  
 \_\_\_\_\_ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. \_\_\_\_\_.

**Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)**

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
1	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed	KLAM 14819	40 S	12 E	33	SW	SW		only use 1 f primary well doesn't work Primary
2	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed	KLAM 53641	40 S	12 E	33	SW	SW		
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed								
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed								

**Check all type(s) of temporary change(s) proposed below (change "CODES" are provided in parentheses):**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Place of Use (POU)        | <input type="checkbox"/> Appropriation/Well (POA)                 |
| <input type="checkbox"/> Point of Diversion (POD)             | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) |   |

**Check all type(s) of temporary change(s) due to drought proposed below (change "CODES" are provided in parentheses):**

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Point of Appropriation/Well (POA)        |
| <input type="checkbox"/> Character of Use (USE)        | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Point of Diversion (POD)      | <input type="checkbox"/> Additional Point of Diversion (APOD)     |

**Will all of the proposed changes affect the entire water right?**

- Yes Complete only the Proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the water right to be changed.

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Please use and attach additional pages of Table 2 as needed.  
See page 6 for instructions.

Do you have questions about how to fill-out the tables?  
Contact the Department at 503-986-0900 and ask for Transfer Staff.

**Table 2. Description of Temporary Changes to Water Right Certificate # 27103 + G-12450**

List only the part of the right that will be changed. For the acreage in each 1/4 1/4, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	Rng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9		15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
"	"	"	"	"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
40	S	12	E	28	SW	NW	6800		17.4	irrigation				40	S	12	E	33	NW	SW	801		20.0			
40	S				NW	SW			1.0					40	S	12	E	33	NE	SW	900		20.4			
					SW	SW			6.0																	
					SW	SW			6.0																	
40	S	12	E	28	SW	NW			10.1																	
TOTAL ACRES												TOTAL ACRES														

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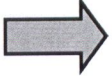
Additional remarks: \_\_\_\_\_.



**For Place of Use Changes**

Are there other water right certificates, water use permits or ground water registrations associated with the “from” or the “to” lands?  Yes  No

If YES, list the certificate, water use permit, or ground water registration numbers: \_\_\_\_\_



Pursuant to ORS 540.525, any “layered” water use such as an irrigation right that is supplemental to a primary right proposed for temporary transfer can be included in the transfer or remain unused on the authorized place of use. If the primary water right does not revert soon enough to allow use of the supplemental right within five years, the supplemental right shall become subject to cancellation for nonuse under ORS 540-610.

**For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation if necessary to convey the water to the new temporary place of use:**

- Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (Tip: You may search for well logs on the Department’s web page at: [http://apps.wrd.state.or.us/apps/gw/well\\_log/Default.aspx](http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx))

**AND/OR**

- Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

**Table 3. Construction of Point(s) of Appropriation**

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right

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NOTICE TO WATER WELL CONTRACTOR  
The original and first copy  
of this report are to be  
filed with the

STATE ENGINEER, SALEM, OREGON 97310  
within 30 days from the date  
of well completion.

**RECEIVED**  
WATER WELL REPORT  
OCT 24 1972  
STATE OF OREGON  
STATE ENGINEER  
SALEM, OREGON  
(Do not write above this line)  
6-6106

Well No. 405/12E-28<sup>cd</sup>  
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**(1) OWNER:**

Name WEYERHAEUSER CO  
Address PO Box 9  
KLAMATH FALLS, ORE

**(2) TYPE OF WORK (check):**

New Well  Deepening  Reconditioning  Abandon   
If abandonment, describe material and procedure in Item 12.

**(3) TYPE OF WELL:**

Rotary  Driven   
Cable  Jetted   
Dug  Bored

**(4) PROPOSED USE (check):**

Domestic  Industrial  Municipal   
Irrigation  Test Well  Other

**(5) CASING INSTALLED:**

Threaded  Welded   
10 3/4" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_  
1" Diam. from +1 ft. to 71 ft. Gage 250  
" Diam. from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Gage \_\_\_\_\_

**(6) PERFORATIONS:**

Perforated?  Yes  No.  
Type of perforator used \_\_\_\_\_  
Size of perforations in. by \_\_\_\_\_ in.  
perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
perforations from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**(7) SCREENS:**

Well screen installed?  Yes  No  
Manufacturer's Name \_\_\_\_\_  
Type \_\_\_\_\_ Model No. \_\_\_\_\_  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
Diam. \_\_\_\_\_ Slot size \_\_\_\_\_ Set from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**(8) WELL TESTS:**

Drawdown is amount water level is lowered below static level  
Was a pump test made?  Yes  No If yes, by whom? Valley Pump  
Yield: 825 gal./min. with 40 ft. drawdown after 3 hrs.  
" " " " " " " "  
" " " " " " " "  
Bailer test gal./min. with \_\_\_\_\_ ft. drawdown after \_\_\_\_\_ hrs.  
Artesian flow \_\_\_\_\_ g.p.m.  
Temperature of water 53 Depth artesian flow encountered \_\_\_\_\_ ft.

**(9) CONSTRUCTION:**

Well seal—Material used BENTONITE  
Well sealed from land surface to 40 ft.  
Diameter of well bore to bottom of seal 13 in.  
Diameter of well bore below seal \_\_\_\_\_ in.  
Number of sacks of cement used in well seal \_\_\_\_\_ sacks  
Number of sacks of bentonite used in well seal 18 sacks  
Brand name of bentonite AQUASELL  
Number of pounds of bentonite per 100 gallons \_\_\_\_\_  
of water \_\_\_\_\_ lbs./100 gals.  
Was a drive shoe used?  Yes  No Plugs \_\_\_\_\_ Size: location \_\_\_\_\_ ft.  
Did any strata contain unusable water?  Yes  No  
Type of water? \_\_\_\_\_ depth of strata \_\_\_\_\_  
Method of sealing strata off \_\_\_\_\_  
Was well gravel packed?  Yes  No Size of gravel: \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**(10) LOCATION OF WELL:**

County KLAMATH Driller's well number OWRD  
SE 1/4 SW 1/4 Section 28 T40S R12E W.M.  
Bearing and distance from section of \_\_\_\_\_ division corner \_\_\_\_\_

**(11) WATER LEVEL: Completed Well.**

Depth at which water was first found 193 ft.  
Static level 159 ft. below land surface. Date 9/22/72  
Artesian pressure \_\_\_\_\_ lbs. per square inch. Date \_\_\_\_\_

**(12) WELL LOG:**

Diameter of well below casing 4 9/8  
Depth drilled 397 ft. Depth of completed well 397 ft.

Formation: Describe color, texture, grain 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 and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
SANDY TOPSOIL	0	15	
SANDSTONE	15	44	
SANDSTONE & STREAKS YELLOW SHALE	44	68	
YELLOW CLAY	68	92	
BLACK BASALT	92	114	
BROWN LAVA	114	125	
BROWN LAVA & STREAKS YELLOW SHALE	125	217	
BLACK SANDSTONE & STREAKS	217	242	
BROWN SANDSTONE	242	250	
BLACK SANDSTONE	250	265	
YELLOW SANDSTONE	265	299	
BLACK BASALT	299	318	
Decomposed BROWN LAVA	318	328	
BLACK BASALT	328	333	
BROWN LAVA	333	338	
BLACK BASALT	338	344	
BROWN LAVA	344	353	
BLACK BASALT	353	397	WB

Work started 9/11/72 19 Completed 9/22/72 19  
Date well drilling machine moved off of well 9/22/72 19

**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] David M. Stuy Date 10/20/72 19  
(Drilling Machine Operator)  
Drilling Machine Operator's License No. 65L

**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 EE STOREY  
(Person, firm or corporation) (Type or print)  
Address 3831 Hope Falls, ORE  
[Signed] EE Storey  
(Water Well Contractor)  
Contractor's License No. 24 Date 10/20/72 19



STATE OF OREGON  
WATER SUPPLY WELL REPORT  
(as required by ORS 537.765)  
WATER RESOURCES DEPT.  
SALEM, OREGON

JAN 03 2003

Klam  
53641

WELL ID. # L 51773  
START CARD # 145950

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

(1) LAND OWNER Well Number \_\_\_\_\_  
Name U.S. Timberland/Klamath Falls, LLC  
Address 7680 Happy Hollow Lane  
City Bananza, State OR Zip 97623

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

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

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

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 396  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Material	From	To	Sacks or pounds
Diameter	From	To	To				
14	0	230					
8	230	396					

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
<u>14</u>	<u>+1</u>	<u>35</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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"/>

Liner: \_\_\_\_\_

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) \_\_\_\_\_

(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"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Pump  Bailer  Air  Flowing  Artesian

Yield gal/min	Drawdown	Drill stem at	Time
<u>1500</u>	<u>30</u>		<u>1 hr.</u>

Temperature of water 56° 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 12E E or W. WM.  
Section 28 SW 1/4 SW 1/4  
Tax Lot 6800 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_  
30083 Pickett Rd., Malin, OR

(10) STATIC WATER LEVEL:  
169 ft. below land surface. Date 12/30/02  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found \_\_\_\_\_

From	To	Estimated Flow Rate	SWL
<u>230</u>	<u>396</u>	<u>1500</u>	<u>169</u>

(12) WELL LOG:

Ground Elevation \_\_\_\_\_

Material	From	To	SWL
Gray basalt	230	244	
Gray&green basalt	244	252	
Broken brn&gray basalt	252	257	
Gray basalt	257	272	
Red rock	272	287	
Brn lava	287	289	
Gray basalt	289	292	
Decomposed lava	292	298	
Red & brn lava	298	336	
Brn lava	336	350	
Red & brn lava	350	375	
Gray basalt	375	385	
Red & brn lava	385	396	

Date started SALEM, OREGON Completed 12/30/02

(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 water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
WWC Number \_\_\_\_\_  
Signed \_\_\_\_\_ Date \_\_\_\_\_

(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 water supply well construction standards. This report is true to the best of my knowledge and belief.  
WWC Number 1228  
Signed Randy H. Osipain Date 12/30/02

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