

#17

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Klamath
10157
APR 10 1991

365/11E/26 ab

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

(START CARD) # 24105

(1) OWNER:
Name Joseph D. Rollings
Address HC 63 Box 885 C
City Sprague River, State OR. Zip 97639

(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 248 ft.
Explosives used Yes No Type _____ Amount _____

| HOLE | | SEAL | | Amount sacks or pounds |
|----------|-----------|--------------------|---------|---------------------------|
| Diameter | From To | Material | From To | |
| 16" | 0 170' | cement & bentonite | 0 170' | 72 sacks |
| 10" | 170' 248' | open hole | | 6 sacks |

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: 12" | +1' | 170' | .250 | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Liner: none | | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Final location of shoets) _____

(7) PERFORATIONS/SCREENS: none
 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 Bailer Air Flowing Artesian
Yield gal/min Est. 2000 GPM Drawdown _____ Drill stem at 248' Time 1 hr.

Temperature of water 57 Depth Artesian Flow Found _____
Was a water analysis done? No Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other surface
Depth of strata: 5' to 13'

(9) LOCATION OF WELL by legal description:
County Klamath Latitude _____ Longitude _____
Township 36 S N or S. Range 11 E E or W. WM.
Section 26 NW 1/4 NE 1/4
Tax Lot 400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) HC 63 Box 885 C.
Sprague River, OR.

(10) STATIC WATER LEVEL:
6' ft. below land surface. Date 3,13,91
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 5'

| From | To | Estimated Flow Rate | SWL |
|------|------|---------------------|-----|
| 157' | 196' | 500 GPM | 6' |
| 196' | 204' | 500 GPM | 6' |
| 204' | 223' | 500 GPM | 6' |
| 223' | 248' | 500 GPM | 6' |

(12) WELL LOG: Ground elevation 4345

| Material | From | To | SWL |
|---|------|-----|-----|
| Top soil | 0 | 2 | |
| Yellow clay with streaks of fine black sand | 2 | | |
| Blue clay | 13 | 34 | 5' |
| Pumice and sand | 34 | 39 | 5' |
| Yellow clay | 39 | 42 | 5' |
| Brown sandstone | 42 | 47 | 5' |
| Black sandstone | 47 | 76 | 5' |
| Blue clay with streaks of coarse black sand | 76 | 123 | 5' |
| Brown claystone with layers black sandstone | 123 | 136 | 5' |
| Sandy yellow clay | 136 | 141 | |
| Brown cemented gravel | 141 | 144 | 5' |
| Black sandstone | 144 | 155 | 5' |
| Black rock | 155 | 157 | |
| Brown rock conglomerant | 157 | 196 | 6' |
| Broken black lava rock | 196 | 204 | 6' |
| Broken brown rock | 204 | 223 | 6' |
| Black lava rock | 223 | 248 | 6' |

Date started 2,25,91 Completed 3,13,91

(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 _____ WWC Number _____
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 well construction standards. This report is true to the best of my knowledge and belief.
Signed Norm Sney WWC Number 408
Date 3,13,91