

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

Klamath 10181

KLAM 10181

JUN 29 1992

37S/11 1/2 E/25 legal description corrected
 Revised 6/19/92
 8722

WATER RESOURCES DEPT.

(START CARD) #

(1) OWNER:

Name *Jeld Wen Timber & Ranches*
 Address *P.O. Box 1883*
 City *Klamath Falls* State *OR* Zip *97601*

Well Number: *SALEM, OREGON*

(9) LOCATION OF WELL by legal description:

County *Klamath* Latitude _____ Longitude _____
 Township *37* N or S Range *11 1/2* E or W, WM.
 Section *25* NE 1/4 NW 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) *Squaw Flat Road*

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

HOLE			SEAL			Amount sacks or pounds
Diameter	From	To	Material	From	To	
<i>15 1/2"</i>	<i>0</i>	<i>19'</i>	<i>Portland Cement</i>	<i>0</i>	<i>19'</i>	<i>19</i>

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:

Casing/Liner	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
Casing:	<i>16"</i>	<i>1'</i>	<i>20'6"</i>	<i>.250</i>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) *19'6"*

(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"/>

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

Pump Bailer Air Flowing Artesian
 Yield gal/min *1900* Drawdown *1'* Drill stem at _____ Time *1 hr.*

Temperature of water *57°* 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 *no*

Depth of strata: _____

(10) STATIC WATER LEVEL:

198' ft. below land surface. Date *12/11/90*
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found *225'*

From	To	Estimated Flow Rate	SWL
<i>230</i>	<i>267</i>	<i>1600</i>	<i>198'</i>

(12) WELL LOG:

Ground elevation *4000+*

Material	From	To	SWL
<i>Heavy Soil / Loose Rock</i>	<i>0</i>	<i>8</i>	
<i>grey clay</i>	<i>8</i>	<i>40</i>	
<i>br gritty clay</i>	<i>40</i>	<i>56</i>	
<i>course black sand</i>	<i>56</i>	<i>57</i>	
<i>lava rock</i>	<i>57</i>	<i>135</i>	
<i>grey sandy clay</i>	<i>135</i>	<i>160</i>	
<i>lava rock</i>	<i>160</i>	<i>225</i>	
<i>basalt rock</i>	<i>225</i>	<i>267</i>	<i>198'</i>
<i>broken lava streaks of</i>			
<i>br sandy clay</i>	<i>267</i>	<i>285</i>	
<i>dark basalt rock</i>	<i>285</i>	<i>293</i>	

Date started *9/18/90* Completed *4/24/91*

(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 _____ Date _____ WWC Number _____

(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 *Chad E. Hill* Date *5/14/91* WWC Number *807*