STATE OF OREGON

WATER WELL REPORT (as required by ORS 537.765)



6 1992

(START CARD) # 29008

MAY

(1) OWNER: Well Number: Name TRIPLE H FARMS- HARNSBARGER						(9) LOCATION OF WELL by legal description:					
Address2900 CROSSROAD						County KLAMATH Latitude Longitude Longitude Longitude					
City KLAMATH FALL, State OR. Zip 97603						Township 40s Nor S. Range 10 E E or W. WM. Section 30 NE 4 SW 4					
(2) TYPE OF WORK:						Section 3300 Lot Block Cubdiction					
V						Tax Lot 3300 Lot Block Subdivision Street Address of Well for nearest address 17920 CHEYNE RD.					
New Well Deepen Recondition Abandon (3) DRILL METHOD						KLAMATH FALLS, OREGON					
	Rotary Mud	☐ Cable				(10) STATIC W	ATER LEVEL:				
						39' ft.1			Date	1, 27,	92
Other						Artesian pressure lb. per square inch. Date					
• •	Community	Industrial X	☐ Irrigati	on					Date		
		Other	• •			(11) WATER B	EARING ZONE	:o:			
	OLE CONST					Depth at which water was	first found 7'				
Special Construction approval Yes No Depth of Completed Well 15 ft.						From	То		nated Flow		SWL
Yes No X						7	39		GPN		3′
Explosives used Type Amount						55	56	l	GPN		4'
HOLE		SEAL al From	т-	Amou	nt	86	87	l_	GPN		4'
20" 0	To Materi 125 CEME	ÄT Õ	125	sacks or p	AC	303	414	AIIA	CHE	,	l
	352 OPE					(12) WELL LO	G: Ground elevati	ion 410	00		
10" 352	415 OPE	vii	·				Material		From	To	SWL
						SANDY TOP S			a	2	_
How was seal placed	d: Method 🔲 A	□въДс	□ D □] E		SANDY TOP SOIL BROWN CALY			2	39	3,
Other						BLUE CLAY			39	55.	4'
Backfill placed from	1 ft. to	ft. Mater	ial			COARSE BLAC			55	56	
Gravel placed from	ft. to	ft. Size of	gravel			BLUE CLAY			56	86	
(6) CASING	J/LINER:					BLACK SAND			86	87	4'
Diameter	From To (+1 125	Gauge Steel F	lastic W	Velded Thi	readed	BLUE CLAY			87_	303	
Casing: 16"	+1 1K2		_		_	BLACK SANDS	TONE	_ 3	103	351	39'
		 □				BLACK LAVA	ROCK		51	386	39,
						BLACK & BRO	WN CINDERS		86_	414	39'
Liner: NONE	+ + +	 - □				BLACK ROCK			14	415	 -
Liner: HORE	+ + +	 									
<u> </u>	125'					<u> </u>					-
Final location of she										 	-
(7) PERFO	RATIONS/SC	REENS:				<u> </u>					-
Perforation									 	 	-
☐ Screens	Type		Material .								+
From To	Slot size Number		e/pipe size (Casing L	iner						+
10111			3120								\vdash
						<u>-</u>			Ì		1
											1
										i	
						Date started 4, 20,	.92 Com	pleted4.	27.	92	
							Vell Constructor Ce				
(8) WELL T	ESTS: Minim	um testing t	ime is 1			,	e work I performed o			on, alter	ration, or
☐ Pump	☐ Bailer	☐ Air	Г	Flowing Artesian		abandonment of this	well is in compliance	e with	Oregon	well con	struction
•						standards. Materials u knowledge and belief.	ised and information i	reported	above at	re true to	o my best
Yield gal/min Drawdown		Drill stem at		Time		ocage and benefit		V	VWC Nu	mber _	
				1 hr.		Signed		D	ate		
				_					-		
	<u> </u>	_				(bonded) Water Wel				or ahar	idonment
Temperature of water 64 Depth Artesian Flow Found					I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. all						
Was a water analysis done?					work performed dur construction standard						
						haliaf				_	_
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other NONE						Signed Tax	m Sand	ν _'	nate	-, « <u>/</u> .	. 5/2
Deptn of strata:			•			Digited		<u> </u>	-uu		



 ${\color{red} \underline{O} \; R \; E \; G \; O \; N}$ Oregon Water Resources Department 725 Summer Street NE, Suite A Salem Oregon 97301 (503) 986-0900 WATER RESOURCES
DEPARTMENT www.oregon.gov/owrd

Application for Well ID Number

Do not complete if the well already has a Well Identification Number.	RECEIVED			
	FEB 27 2023			
I. OWNER INFORMATION	OWRD			
Current Owner Name (please print): Shirley M. Gresham				
Mailing Address: 4179 Old Midland Rd				
City, State, Zip: Klamath Falls Or 97603				
Mail Well ID to: SAME AS ABOVE In Care Of (C/O)				
Name & Address:				
City, State, Zip:				
II. WELL LOCATION INFORMATION (Please fill out as completely as possible) Township: 40 S (North / South) Range: 10 E (East / West) Section: 30 NE Tax Lot (usually last 3-5 numbers of Tax Map #): 3300 County Klamath GPS Coordinates: 42.05710012 -121.68284896 per ew site / w Street Address of Well, City: 17920 Cheyne Rd Klamath Falls Or If the property had a different street address in the past: III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Rep Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation Date Well Constructed (or property built): 4-27-92 Total Well Depth: 415 Casi Owner at time the well was constructed (if known): Triple H Farms Harnsbarger Well Report # (if known)	oort, if available) - # 91254 ing Diameter: 16"			
Other Information:	m): 10-11/1 / (1			
SUBMITTED BY (please print): Shirley M. Gresham PHONE: 541-850-9851 EMAIL &/or FAX: oldmidlandrd@gmail.com To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE,	ite A, Salem, Oregon 97301.			
For Official Use Only by the Oregon Water Resources Department:				
Received Date: Well Report Number: 2-27-23 KLAM 10449	Well Identification #: L-150734			