

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

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JUL 14 1992

(START CARD) # 39895

(1) OWNER:

Name **FERRIS M. STOTLER**

Address **P.O. BOX 38**

City **BEATTY** State **OR** Zip **97621**

(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 **253'**

HOLE Diameter From To Material SEAL From To NONE Amount sacks or pounds

20" **0** **168'** **CEMENT** **0** **168** **13sax**

" **"** **"** **BENTONIT** **"** **"** **1 SAG**

10" **168'** **253'** **OPEN**

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:				☐	☐	☐	☐
16	1.5	168.250		☒	☐	☒	☐
				☐	☐	☐	☐
Liner:				☐	☐	☐	☐
				☐	☐	☐	☐

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____

☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Bailer ☐ Air ☐ Flowing ☐ Artesian

Yield gal/min Drawdown ☒ Drill stem at Time

_____ 1 hr.

3000 **200**

Temperature of Water _____ 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: **NONE**

(9) LOCATION OF WELL by legal description:

County **KLAMATH** Latitude _____ Longitude _____

Township **36 S** N or S. Range **12 EAST** E or W. WM.

Section **24** NW 1/4 NW 1/4

Tax Lot _____ Lot _____ Block _____ Subdivision _____

Street Address of Well (or nearest address) **1 MILE EAST OF**

BEATTY OFF HWY 140 TO SOUTH 1/4 MI

(10) STATIC WATER LEVEL:

_____ ft. below land surface. Date **6, 15, 92**

Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

From	To	Estimated Flow Rate	SWL
102	115	100 GPM	
122	169	200 GPM	
169	253	3000 GPM	

(12) WELL LOG:

4250

Ground elevation _____

TOP SOIL	Material	From	To	SWL
	YELLOW CLAY & PUMICE	3	15	
	YELLOW CLAY	15	34	
	BLUE CLAY	34	56	
	BLACK SANDSTONE & CLAY	56	66	
	BROWN CALY & PUMICE	66	84	
	BLUE CLAY	84	91	
	BROWN CLAY	91	102	
	BLACK LAVA ROCK	102	107	45
	BROWN SANDSTONE	107	115	45
	BROWN CLAYSTONE	115	122	
	BROWN SANDSTONE	122	169	45
	BROWN ROCK	169	182	45
	BROWN SANDSTONE A	182	188	45
	BROWN ROCK	188	194	45
	BROWN CINDERS	194	202	45
	GRAY ROCK	202	253	45

Date started **6, 9, 92** Completed **6, 15, 92**

(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 Sevey** WWC Number _____

Date **408**



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem Oregon 97301
(503) 986-0900
www.oregon.gov/owrd

Application for Well ID Number

RECEIVED

JAN 4 2024

OWRD

Do not complete if the well already has a Well Identification Number.

I. OWNER INFORMATION

Current Owner Name (please print): Patton Ranch Management
Mailing Address: 35440 Briggs Road
City, State, Zip: Murrieta, CA 92563
Mail Well ID to: ☐ SAME AS ABOVE ☒ In Care Of (C/O)
Name & Address: Attn: Chris Evans 44206 Hwy 140E
City, State, Zip: Beatty OR 97621

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 36 S (North / South) Range: 12 E (East / West) Section: 24 SW 1/4 of the NW 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #): 9600 County Klamath
GPS Coordinates: Latitude: 42.437458; Longitude: -121.249569
Street Address of Well, City: 44220 East Highway 140, Beatty, OR 97621
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 Report, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): Irrigation
Date Well Constructed (or property built): 6-15-1992 Total Well Depth: 253' Casing Diameter: 16"
Owner at time the well was constructed (if known): Ferris M. Stotler Well Report # (if known): KLAM 10505
Other Information: _____

SUBMITTED BY (please print): David Kent Patton
PHONE: 951-415-5500 EMAIL &/or FAX: dkpatton@aol.com

To send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97301.
Or EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

1-4-2024

Well Report Number:

KLAM 10505

Well Identification #:

L-153447