

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

KLAMATH
10748

RECEIVED

JUN 17 1993

4/15/13E/12bd
 39927

WATER RESOURCES DEPARTMENT (PART CARD) #

(1) OWNER:

Well Number **#2**
 Name **BALIN RANCHES**
 Address **13600 HOMESTEAD RD**
 City **KLAMATH FALLS** State **ORE** Zip **97601**

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

HOLE		SEAL				Amount sacks or pounds
Diameter	From	To	Material	From	To	
22	0	192	CONCRETE	0	192	200 SCS
12 1/4	192	580				

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	Material			
				Steel	Plastic	Welded	Threaded
16"	71	192	.250	<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"/>

Final location of shoe(s) **580 FEET**

(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
1000		250	1 hr.

Temperature of Water **67°F** Depth Artesian Flow Found _____
 Was a water analysis done? Yes No 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 **41S** N or S. Range **13E** E or W. WM. _____
 Section **12** **SE** $\frac{1}{4}$ **NW** $\frac{1}{4}$ _____
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) **WEST LANGRISH VALLEY RD BONANZA, OREGON**

(10) STATIC WATER LEVEL:

14 ft. below land surface. Date **5/5/93**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
		INDETERMINATE	

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
BROWN SANDY CLAY JOHNSON	0	2	
BROWN SANDY CLAY & Boulders	2	4	
YELLOW CHALK	4	37	
DECOMPOSED BROWN LAVA & CHALK	37	40	
YELLOW CLAY	40	113	
GREEN CLAY WITH STRONG SAND	113	155	
GREEN CLAY	155	177	
HARD BLACK SANDSTONE	177	213	
GREEN CLAY	213	352	
HARD BLACK BASALT	352	367	
BROWN BROWN BASALT	367	377	
HARD GREY BASALT	377	416	
BLACK BASALT	416	419	
BROWN BASALT	419	437	
HARD BLACK BLACK BASALT	437	452	
HARD GREY BASALT	452	480	
BLACK BASALT WITH GREY MASH	480	487	
BLACK BASALT	487	512	
HARD GREY BASALT	512	518	
BROWN BLACK BASALT	518	548	
HARD BROWN GREY BASALT	548	560	
BROWN BLACK BASALT	560	580	

Date started **4/12/93** Completed **5/5/93**

(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.
 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 well construction standards. This report is true to the best of my knowledge and belief.
 WWC Number **601**
 Signed **Paul M. King** Date **4/5/93**