

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

**KLAMATH**  
**10866**

**RECEIVED**

**AUG 30 1993**

**245/6E/13C**  
**33319**

WATER RESOURCES DEPT

(START CARD) #

(1) OWNER: Well Number 1 SALEM, OREGON  
Name DESCHUTES NATIONAL FOREST  
Address HWY 20 E,  
City BEND OR. State \_\_\_\_\_ Zip 97701

(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 CAMP GROUND

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 165 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL		Amount sacks or pounds
Diameter	From To	Material	From To	
10"	0 40	GRUNT	0 40	20 1/2
6"	40 165	—	—	—

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: 6"	+1	165	.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 shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:  
 Perforations Method HOLTE PERFORATOR  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
150	160	1/4	200	1/4 x 1/4		<input type="checkbox"/>	<input type="checkbox"/>

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

Pump  Bailor  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
55	TOTAL	165	1 hr.

Temperature of Water 50 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: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County KLAMATH Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 24S N or S. Range 6E E or W. WM. \_\_\_\_\_  
Section 13 SW 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) SIMAX CAMPGROUND CRESCENT LAKE

(10) STATIC WATER LEVEL:  
66 ft. below land surface. Date 20 AUG 93  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:  
Depth at which water was first found 68'

From	To	Estimated Flow Rate	SWL
66'	165'	55 GPM	66

(12) WELL LOG: Ground elevation 4800' (APPROX)

Material	From	To	SWL
PUMICE	0	6	—
UNCONSOLIDATED ANGULAR TO SUB-ROUNDED ROCK RANGING FROM LARGE BOULDER TO SILT SIZE EST. 40% GRAVEL SIZES 60% SAND & SILT SIZE	6	72	66
HEAVING SAND DARK GREY MAX SIZE 1/4"	72	93	66
SAME AS INTERVAL 6'-72' W/SCAT RED VESICULAR ROCKS	93	165	66

Date started 3 AUG 93 Completed 22 AUG 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.  
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 Walter N White WWC Number 638  
Date 22 AUG 93