

ORIGINAL
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STATE ENGINEER,
SALEM, OREGON

Klam
13290

RECEIVED
STATE OF OREGON
MAY 23 1961

State Well No. 39/10-299(1)
State Permit No.

(1) OWNER:

Name Lester Z. Brookshire
Address 1625 Mc Clellan Drive
Klamath Falls, Ore.

STATE ENGINEER
SALEM, OREGON

(11) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yes No If yes, by whom?

Yield:	gal./min. with	ft. drawdown after	hrs.
"	"	"	"
"	"	"	"

(2) LOCATION OF WELL:

County Klamath Owner's number, if any—
SE 1/4 SW 1/4 SE 1/4 Section 29 T. 39S R. 10 E W.M.
Bearing and distance from section or subdivision corner
N67°19'E 174.5 Ft. From a
monument on the SW corner
E 1/2 SW 1/4 SE 1/4 Section 29 T39S
R10 E W.M.

Ballor test gal./min. with ft. drawdown after hrs.

Artesian flow 45 g.p.m. Date 3/1/61

Temperature of water 84 Was a chemical analysis made? Yes No

(12) WELL LOG:

Diameter of well _____ inches.

Depth drilled _____ ft. Depth of completed well _____ ft.

Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
<u>Sandy top soil</u>	<u>0</u>	<u>5</u>
<u>tan clay</u>	<u>5</u>	<u>35</u>
<u>Green chalk</u>	<u>35</u>	<u>1135</u>
<u>lava silt mixed with</u>	<u>1135</u>	
<u>gray chalk</u>		<u>1180</u>
<u>black broken lava rock</u>	<u>1180</u>	<u>1200</u>

TYPE OF WORK (check):

Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 11.

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(5) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(6) CASING INSTALLED:

Threaded Welded

8 5/8" Diam. from 0 ft. to 45 ft. Gage 188

" Diam. from _____ ft. to _____ ft. Gage _____

" Diam. from _____ ft. to _____ ft. Gage _____

(7) PERFORATIONS:

Perforated? Yes No

Type of perforator used _____

SIZE of perforations in. by in.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

_____ perforations from _____ ft. to _____ ft.

(8) SCREENS:

Well screen installed Yes No

Manufacturer's Name _____

Model No. _____

Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

CONSTRUCTION:

Well gravel packed? Yes No Size of gravel: _____

Gravel placed from _____ ft. to _____ ft.

Was a surface seal provided? Yes No To what depth? 45 ft.

Material used in seal— Cement

Did any strata contain unusable water? Yes No

Type of water? _____ Depth of strata _____

Method of sealing strata off _____

(10) WATER LEVELS:

Static level _____ ft. below land surface Date _____

Artesian pressure 10 lbs. per square inch Date 3/1/61

Log Accepted by:

[Signed] Lester Z. Brookshire Date May 15, 1961
(Owner)

Work started 12/20 1960. Completed 2/27 1961

(13) PUMP:

Manufacturer's Name _____

Type: _____ H.P. _____

Well Driller's Statement:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.

NAME Fred J. Hilton
(Person, firm, or corporation) (Type or print)

Address 529 1/2 St Klamath Falls
Ore

Driller's well number _____

[Signed] Fred J. Hilton
(Well Driller)

License No. _____ Date 5/15, 1961