

KLAM 50341 RECEIVED

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JUL - 9 1996

STATE OF OREGON
WATER SUPPLY WELL REPORT

(START CARD) # 83014

Instructions for completing this report are on the last page of this form. WATER RESOURCES DEPT.

SALEM, OREGON

(1) OWNER: Well Number LI
Name Swan Lake Ranch
Address 19303 Hwy 140 E
City Dairy, State OR Zip 97625

(2) TYPE OF WORK
 New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 216 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
20	0	67 1/2	cement	0	67 1/2	81
16	67 1/2	190				
12	190	216				

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	0	67 1/2	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 67 1/2

(7) PERFORATIONS/SCREENS:

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

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

Yield gal/min	Drawdown	Drill stem at	Time
2500	8'		1 hr

Temperature of water 56 Depth Artesian Flow Found _____
Was a water analysis done? No Yes By whom _____
Did any strata contain water not suitable for intended use? No Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Klamath Latitude _____ Longitude _____
Township 38S N or S Range 11 1/2E E or W. WM.
Section 28 SW 1/4 NW 1/4
Tax Lot 4500 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____
19303 Hwy 140E

(10) STATIC WATER LEVEL:
116 ft. below land surface. Date 6/20/96
Artesian pressure _____ lb. per square inch. Date _____

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

From	To	Estimated Flow Rate	SWL
164	216	2500	116

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Sandy topsoil	0	6	
Soft brn sandstone	6	36	
Brn sand stone & shale	36	47	
Brn sand stone	47	59	
Yellow clay	59	136	
Broken gry basalt	136	185	
Broken brn & gray basalt	185	216	

Date started 5/31/96 Completed 6/20/96

(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 water supply well construction standards. Materials used and information reported above are true to the best of my 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 water supply well construction standards. This report is true to the best of my knowledge and belief.
WWC Number 1228
Signed Larry L. Delpain Date 6/30/96