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

KLAM
50677

(START CARD) # 39575

(1) OWNER: Well Number
Name NEIL HIBBEN
Address HC 32 Box 310
City GILCHRIST State ORE Zip 97737

(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 40 ft.
Explosives used ☐ Yes ☒ No Type Amount

HOLE Diameter	From	To	SEAL Material	From	To	Amount sacks or pounds
10"	0	20	CEMENT	0	20	7 SACK

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	37	250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:					☐	☐	☐	☐
					☐	☐	☐	☐

Final location of shoe(s) 37'

(7) PERFORATIONS/SCREENS:
☒ Perforations Method TORCH
☐ Screens Type Material

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
34	37	1/4	20	6		☒	☐
						☐	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour
☒ Pump ☐ Bailer ☐ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
20	0		4 hr.

Temperature of Water 47 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 23 S Range 9 E E or W. WM.
[redacted] 12 ¼ ¼
Tax Lot 200 Lot Block Subdivision
[redacted] Well (or nearest address)

(10) STATIC WATER LEVEL:
ft. below land surface. Date
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:
Depth at which water was first found 25

From	To	Estimated Flow Rate	SWL
25	40	20	20

(12) WELL LOG:
Ground elevation

Material	From	To	SWL
PUMICE	0	4	—
CLAY	4	25	
SAND GRAVEL	25	40	20

RECEIVED
MAR 18 1996
WATER RESOURCES DEPT.
SALEM, OREGON

Date started 9-1-92 Completed 9-4-92

(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. Material 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 556
Signed Harry May Date 9-4-92

ORIGINAL & FIRST COPY - WATER RESOURCES DEPARTMENT SECOND COPY - CONSTRUCTOR THIRD COPY - CUSTOMER 9809C 10/9