

KLAM
S0865

WELL I.D.# L14517

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

WATER RESOURCES DEPT.
SALEM, OREGON

(START CARD) 096656

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

(1) OWNER: Well Number L14517
Name RICHARD THIERIOT- SAND CREEK RANCH
Address P.O. BOX 922
City CHILOQUIN State OR Zip 97624

(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 434 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
14"	0	250	CT&BT	0	250	57 SKS
10"	250	418	OPEN			
8"	418	434	OPEN			

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 10"	+1	250	25	<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) 250 FT.

(7) PERFORATIONS/SCREENS:

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"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
1000		120 FT.	1 hr.

Temperature of water 49 F Depth Artesian Flow Found NONE
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 SURFACE
Depth of strata: 4' TO 15'

(9) LOCATION OF WELL by legal description:
County KLAMATH Latitude _____ Longitude _____
Township 32 S N or S Range 11 E E or W. WM.
Section 08 NW 1/4 SW 1/4
Tax Lot 400 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1320 FT. N. OF SW CORNER OF S. 8 T. 32S R. 11 E

(10) STATIC WATER LEVEL:
10 FT. ft. below land surface. Date 07-30-97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 4 FT.

From	To	Estimated Flow Rate	SWL
58	99	50 GPM	25
252	291	100 GPM	10
372	408	150 GPM	10
421	434	2000 GPM	10

(12) WELL LOG:
Ground Elevation 4150

Material	From	To	SWL
PUMICE TOP SOIL	0	4	
WHITE PUMICE	4	7	4
PEA GRAVEL	7	15	4
BROWN CLAY & GRAVEL	15	18	
BROWN SANDSTONE	18	40	
BROWN CLAYSTONE	40	58	
BLACK PUMICE	58	79	25
SOFT BLACK ROCK	79	92	25
BROWN PUMICE	92	99	25
GRAY ROCK	99	114	
BROWN CLAYSTONE	114	127	
BROWN CLAY & GRAVEL	127	132	
SANDY BROWN CLAY	132	158	
BLACK ROCK	158	163	
SANDY BROWN CLAY	163	226	
GRAY ROCK	226	231	
GRAY PUMICE	231	238	
SANDY BROWN CLAY	238	252	
BLACK LAVA ROCK	252	268	10

CONTINUED ON ANOTHER PAGE
Date started 07-11-97 Complete 07-30-97

(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 777
Signed Stephen R. Hughes Date 8-12-97

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421	434	2000 GPM	10

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Ground Elevation 4150

Material	From	To	SWL
... CONTINUED FROM PAGE 1			
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GRAY ROCK	291	372	
RED CINDER ROCK	372	392	10
BROWN LAVA ROCK	392	408	10
BLACK ROCK	408	421	
BROWN LAVA ROCK	421	426	10
BLACK LAVA ROCK	426	429	10
BROWN LAVA ROCK	429	434	10

Date started 07-11-97 Completed 07-30-97

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