

NOV 02 1999

KLAM
52036

STATE OF OREGON
WATER SUPPLY WELL REPORT WATER RESOURCES DEPT.
(as required by ORS 537.765) SALEM, OREGON

WELL I.D. # L L33858
START CARD # 108541

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

(1) OWNER: F. WILLIAM BRADY Well Number _____

Name F. WILLIAM BRADY
Address 10 HANGAR WAY
City WATSONVILLE State CA Zip 95073

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

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10	0	18	CENT & BENT.	0	18	4 SKS
7	18	85	OPEN			9 SKS
5 1/2	85	94	CENT.	75	85	15 SKS

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"	0	85	2 1/2	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: XXX				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 85 FT.

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
35 GPM		8 FT.	1 hr.

Temperature of water 39 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: 8 FT.

(9) LOCATION OF WELL by legal description:
County KLAMATH Latitude _____ Longitude _____
Township 36 S N or S Range 06 E E or W. WM.
Section 2 BB NW 1/4 NW 1/4
Tax Lot 2900 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 27505 ROCKY POINT

(10) STATIC WATER LEVEL:
3 ft. below land surface. Date 10-21-99
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 8 FT.

From	To	Estimated Flow Rate	SWL
8	27	20 GPM	3'
27	48	70 GPM	3'
48	72	50 GPM	3'
72	94	150 GPM	3'

(12) WELL LOG:
Ground Elevation 4200

Material	From	To	SWL
TOP SOIL	0	3	
SANDY BROWN CLAY	3	8	
BROKEN BLACK & BROWN	8		
LAVA ROCK & BRN CLAY		27	3
BLACK & BROWN CINDERS & BROWN CLAY	27	48	3
RED & BROWN CINDERS & BROWN CLAY	48	72	3
BROKEN BLACK LAVA ROCK & BLACK & BROWN CINDERS	72	94	3

Date started 10-13-99 Completed 10-21-99

(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.

Signed J. Brad Pinkard WWC Number 1560 Date 10-29-99

(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.

Signed Stephen R. Hughes WWC Number 777 Date 10-29-99