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

WELL I.D. # L 37543
START CARD # 103255

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

(1) OWNER: Well Number _____
Name Don Smith
Address 6955 N. Flintwood Rd.
City Parker State CO Zip 80138

(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 520 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
12	0	51	bentonite	0	-3	4 sacks
8	51	520	cement	-3	51	21 sacks

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: 8"	2	51	.250	☒	☐	☒	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
Liner:				☐	☐	☐	☐
				☐	☐	☐	☐

Final location of shoe(s) _____
(7) PERFORATIONS/SCREENS:

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

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

☐ Pump	☐ Bailer	☒ Air	Flowing ☐ Artesian
Yield gal/min	Drawdown	Drill stem at	Time
45		498	1 hr.

Temperature of water 65° 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 40S N or S Range 11E E or W. WM.
Section 34 SE 1/4 NW 1/4
Tax Lot 105139 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) _____
20109 Adams Pt. Rd.

(10) STATIC WATER LEVEL:
298 ft. below land surface. Date 1/28/00
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 496

From	To	Estimated Flow Rate	SWL
496	520 520	45	

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(12) WELL LOG:
Ground Elevation _____
WATER RESOURCES DEPT.
SALEM, OREGON

Material	From	To	SWL
Topsoil	0	2	
Yellow clay and sand	2	6	
Gray basalt boulders	6	11	
Brn lava	11	17	
Gray basalt	17	24	
Brn and gray lava	24	44	
Gray basalt	44	60	
Broken brn & gray basalt	60	113	
Layers brn Sandstone & shale	113	143	
Brn lava	143	175	
Brn & gray shale	175	203	
Gray basalt	203	216	
Yellow clay	216	228	
Gray Sandstone & basalt	228	255	
Soft gray sandstone	255	263	
Brn & gray basalt	263	283	
Soft brn sandstone	283	313	
Brn & gray lava	313	329	
Brn & gray basalt	329	496	
Hard brn sandstone	496	498	298
Gray basalt	498	520	

Date started 1/12/00 Completed 1/28/00

(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 G. Ospeain Date 1/28/00