

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

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

(START CARD) # 133605

(1) OWNER:

Well Number

Name **KLAMATH COMMUNITY YOUTH SPORTS COMPLEX**
 Address **P. O. BOX 6230**
 City **KLAMATH FALLS,** State **OR** Zip **97601**

(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
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
14	0	180 CEMENT	0	180	46 SACKS
10	180	306 BENTONITE	0	180	4.5 SACKS
8	306	691 CASING SEAL	0	180	5 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:

Casing	Diameter	From To	Gauge	Steel	Plastic	Welded	Threaded
	10	+1	186	.250	X		X

 Liner: **NONE**
 Final location of shoe(s) **NO SHOE USED**

(7) PERFORATIONS/SCREENS:

Perforations Screens		Method		Material		Casing	Liner
From To	Slot size	Number	Diameter	Slot size	Material		
NONE							

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

 Pump
 Bailor
 Air
 Flowing Artesian

Yield gallon	Drawdown	Drill stem at	Time
200 GPM		342 FT	1 HR
150 GPM		187 FT	15 MIN.

 Temperature of Water **109** Depth Artesian Flow found _____

 Was a water analysis done? Yes No By whom _____

 Did any strata contain water not suitable for intended use? Yes No (Too little)

 Salty Muddy Odor Colored Other _____

 Depth of strata: **NONE**

(9) LOCATION OF WELL by legal description:

County **KLAMATH** Latitude _____ Longitude _____
 Township **38S** N or S. Range **09E** E or W of WM _____
 Section **35** SW 1/4 NW 1/4
 Tax lot **800** Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) **905 WARD STREET,
 KLAMATH FALLS, OR 97601 NORTH SIDE OF UPLAND WA1**

(10) STATIC WATER LEVEL:

 17 ft. below land surface Date **4/13/2001**
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

 Depth at which water was first found **116 FT**

From	To	Estimated Flow Rate	SWL
116	166	20 GPM	17
682	691	300 GPM	17

(12) WELL LOG:

Material	Ground elevation 4250		SWL
	From	To	
TOP SOIL	0	2	
YELLOW CLAY	2	21	
BLUE CLAY	21	116	
BLUE CLAY WITH STREAKS OF BLACK SAND (WB)	116	166	17
BLUE CLAYSTONE	166	682	
JOINTED BLUE CLAYSTONE (WB)	682	691	17
BLACK ROCK	691	691	

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MAY 14 2001

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SALEM, OREGON

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WATER RESOURCES DEPT.
SALEM, OREGONDate started **4/8/2001**Completed **4/13/2001**

(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 my best knowledge and belief.

Signed _____

IWC Number _____
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.

Signed *Stephen W. H. Jones*IWC Number **777**
Date **4-10-01**

Volley Pump & Equipment Company

7388 S. 6th Street
 Klamath Falls, Oregon 97603
 Phone 541-884-8778
 Fax 541-884-8840

WELL FLOW TEST**IRRIGATION WELL
19.5 HOUR TEST**

NAME: KLAMATH SPORTS COMPLEX DATE: JULY 29/30
 ADDRESS: PHONE:

TEMPERATURE:

PUMP SETTING:

TIME	STATIC LEVEL	PUMPING LEVEL	GPM	TEMPERATURE
7:30 AM	23 FT	150 FT	150	106
7:45 AM	23 FT	161 FT	150	109
8:00 AM	23 FT	165 FT	150	112
9:00 AM	23 FT	173 FT	150	112
10:00AM	23 FT	181 FT	150	112
11:00AM	23 FT	193' 6"	150	112
11:30AM	23 FT	273 FT	220	112
12:00PM	23 FT	341' 3"	220	112
12:15PM	23 FT	342 FT	220	112
12:30PM	23 FT	340 FT	220	112
1:00 PM	23 FT	339 FT	220	112
2:00 PM	23 FT	339 FT	220	112
3:00 PM	23 FT	342 FT	200	112
3:45 PM	23 FT	342 FT	180	111
3:30 PM	23 FT	342 FT	185	111

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WATER RESOURCES DEPT
SALEM, OREGON

Valley Pump & Equipment Company7366 S. 9th Street
Klamath Falls, Oregon 97603Phone 541-884-8778
Fax 541-884-8640**WELL FLOW TEST****4 HOUR STEP TEST
IRRIGATION WELL**NAME: KLAMATH SPORTS COMPLEX
ADDRESS:DATE: JULY 26, 2001
PHONE:

TEMPERATURE:

PUMP SETTING:

TIME	STATIC LEVEL	PUMPING LEVEL	GPM	TEMPERATURE
1:30PM	24 FT	24 FT	150	106
2:00 PM	24 FT	167 FT	150	110
2:15 PM	24 FT	210 FT	180	112
2:30 PM	24 FT	273 FT	200	112
3:00 PM	24 FT	342 FT	200	112
4:00 PM	24 FT	342 FT	220	112
4:30 PM	24 FT	342 FT	220	112
5:00 PM	24 FT	342 FT	210	112
5:30 PM	24 FT	342 FT	210	112

