

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

WELL I.D. # L 50150
 START CARD # 102524

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

(1) OWNER: Well Number _____
 Name STEVE & IRENE MILWAUERS / ROBERT & MARCY ANDERSON
 Address 4243 OLD MIDLAND RD.
 City KLAMATH FALLS State OR Zip 97603

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

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
<u>14 1/2"</u>	<u>0</u> <u>495</u>	<u>NAU CONCRETE</u>	<u>0</u> <u>495</u>	<u>338</u>	<u>SACKS</u>
<u>2 PLACE</u>	<u>SEAL</u>	<u>BENTONITE</u>	<u>0</u> <u>50</u>	<u>64</u>	<u>SACKS</u>
<u>10"</u>	<u>495</u> <u>630</u>				

How was seal placed: Method A B C D E
 Other BENTONITE POURED
 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: <u>10"</u>	<u>+2</u>	<u>495</u>	<u>250</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	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"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian Time
<u>700</u>		<u>140'</u>	<u>1 hr.</u>

Temperature of water 82° Depth Artesian Flow Found _____
 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 _____
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
 County KLAMATH Latitude _____ Longitude _____
 Township 39 N or S Range 9 or W. WM.
 Section 35 SW 1/4 SW 1/4
 Tax Lot 2100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 4243 OLD MIDLAND RD.

(10) STATIC WATER LEVEL:
22' ft. below land surface. Date 7-28-01
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 17'

From	To	Estimated Flow Rate	SWL
<u>17</u>	<u>18</u>	<u>1 gpm</u>	<u>6'</u>
<u>160</u>	<u>260</u>	<u>15</u>	<u>22</u>
<u>450</u>	<u>630</u>	<u>700+</u>	

(12) WELL LOG: Ground Elevation 4100

Material	From	To	SWL
<u>TOP SOIL</u>	<u>0</u>	<u>5</u>	
<u>BAN CLAY</u>	<u>5</u>	<u>17</u>	
<u>BROWN SAND</u>	<u>17</u>	<u>18</u>	<u>W/B</u>
<u>GREEN CLAY</u>	<u>18</u>	<u>160</u>	
<u>GREEN CLAY/SAND STRATA</u>	<u>160</u>	<u>260</u>	<u>6'</u>
<u>GRAY CLAY</u>	<u>260</u>	<u>390</u>	
<u>GRAY ASH</u>	<u>390</u>	<u>412</u>	
<u>GRAY CLAY</u>	<u>412</u>	<u>450</u>	
<u>GRAY CLAYSTONE</u>	<u>450</u>	<u>610</u>	<u>22</u>
<u>BROKEN LAVA</u>	<u>610</u>	<u>630</u>	<u>22</u>

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 AUG 13 2001
 WATER RESOURCES DEPT
 SALEM, OREGON

Date started 7-7-01 Completed 7-28-01
 (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 1355
 Signed Arthur J. Jay Date 8-7-01