

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

KLAM 52925

WELL ID # L 52034

(START CARD) # 108779

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

(1) OWNER: Well Number:
 Name **DAVID D. & JUDITH A. WILSON**
 Address **10714 SPRING LAKE 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 **262** ft.
 Explosives used Yes No Type Amount

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
16	0 99	3/8 BENTONITE	0 50	40 SACKS	
10	99 262	CEMENT	77 99	10 SACKS	

How was seal placed: Method A B C D E
 Other
 Backfill placed from **50** ft. to **77** ft. Material **BENTONITE 29 BG**
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12	+1	99	.250	<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) **NONE**

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
NONE							

Perforations Method **NONE**
 Screens Type Material

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

Pump Bailor Air Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
2000+ GPM		99 FT.	1 hr.

Temperature of Water **80 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 _____
 Depth of strata: **NONE**

(9) LOCATION OF WELL by legal description:
 County **KLAMATH** Latitude Longitude
 Township **39S** N or S. Range **09E** E or W. of WM.
 Section **34** NW 1/4 SE 1/4
 Tax lot **1100** Lot Block Subdivision
 Street Address of Well (or nearest address) **10714 SPRING LAKE RD.**
KLAMATH FALLS, OR

(10) STATIC WATER LEVEL:
54 ft. below land surface. Date **9/5/2001**
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found **61 FT.**

From	To	Estimated Flow Rate	SWL
61	262	2500 GPM	54

(12) WELL LOG: Ground elevation **4150**

Material	From	To	SWL
TOP SOIL	0	1	
YELLOW CLAY	1	10	
BROWN LAVA ROCK	10	12	
BLACK LAVA ROCK	12	109	54
RED LAVA ROCK	109	121	54
BLACK LAVA ROCK	121	185	54
BLACK CINDER ROCK	185	238	54
GRAY CLAYSTONE	238	243	
BLACK LAVA ROCK	243	262	54

RECEIVED

SEP 14 2001

WATER RESOURCES DEPT.
 SALEM, OREGON

Date started **8/28/2001** Completed **9/5/2001**

(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 _____ WWC 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 R. Hedges* WWC Number **777**
 Date **9/10/2001**