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

DEC 02 2005

WELL I.D. # L 81223

WATER RESOURCES DEPT  
SALEM, OREGON

START CARD # 182084

Instructions for completing this report are on the back of this form.

(1) LAND OWNER Well Number \_\_\_\_\_  
Name **KLAMATH PUBLISHING LLC**  
Address **1301 ESPLANADE**  
City **KLAMATH FALLS** State **OR** Zip **97601**

(2) TYPE OF WORK  New Well  
 Deepening  Alteration (repair/recondition)  Abandonment  Conversion

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Other \_\_\_\_\_

(4) PROPOSED USE  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION Special Construction:  Yes  No  
Depth of Completed Well **442** ft.  
Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
16	0	198	3/8 BENT.	0	40	52 SACKS
10	198	442	CEMENT	40	198	186 SACKS

How was seal placed: Method  A  B  C  D  E  
 Other **3/8 BENTONITE POURED**

Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

Casing:	Diameter	From	To	Gauge	Steel				Plastic		Welded		Threaded	
					✓									
	10	+2	198	.250										
Liner:	NONE													

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS  
 Perforations Method **NONE**  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

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

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
200 GPM		300 FT.	1 hr.

Temperature of water **194 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 (legal description)  
County **KLAMATH**  
Tax Lot **200** Lot \_\_\_\_\_  
Township **38 S** N or S **Range 09 E** E or W **WM**  
Section **34 BB** **NW** 1/4 **NW** 1/4  
Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Street Address of Well (or nearest address) **2701 FOOTHILLS BLVD.**  
**KLAMATH FALLS, OR 97601**

(10) STATIC WATER LEVEL  
**88** ft. below land surface. Date **11/21/2005**  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES  
Depth at which water was first found **343 FT.**

From	To	Estimated Flow Rate	SWL
343	442	300 GPM	88

(12) WELL LOG Ground Elevation **4175**

Material	From	To	SWL
GRAVEL	0	1	
YELLOW CLAYSTONE	1	58	
GRAY CLAYSTONE	58	343	
FRACTURED BLACK ROCK	343	442	88

Date Started **11/09/2005** Completed **11/21/2005**

(unbonded) Water Well Constructor Certification  
I certify that the work I performed on the construction, deepening, 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 \_\_\_\_\_ Date \_\_\_\_\_  
Signed \_\_\_\_\_

(bonded) Water Well Constructor Certification  
I accept responsibility for the construction, deepening, 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 **777** Date **11/29/2005**  
Signed *Stephen R. Higgins*