

STATE OF OREGON

WATER SUPPLY WELL REPORT

(as required by ORS 537.765 & OAR 690-205-0210)

11-04-2008

WELL LABEL # L 97443

START CARD # 1005398

(1) LAND OWNER Owner Well I.D. _____

First Name _____ Last Name _____
Company KLAMATH OUTDOOR SCIENCE SCHOOL
Address 707 CYPRESS AVE.
City KLAMATH FALLS State OR Zip 97601

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

(3) DRILL METHOD
[] Rotary Air [X] Rotary Mud [] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other _____

(4) PROPOSED USE [X] Domestic [] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other _____

(5) BORE HOLE CONSTRUCTION Special Standard [] (Attach copy)

Table with columns: Dia, From, To, Material, SEAL, From, To, Amt, sacks/lbs. Includes rows for Bentonite Chips and Cement.

How was seal placed: Method [] A [] B [X] C [] D [] E
[X] Other Bent. Chips Poured
Backfill placed from _____ ft. to _____ ft. Material _____
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: [] Yes Type _____ Amount _____

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd
[] [] [X] 8 [X] 2 155 .250 [X] [] [X] []
Shoe [] Inside [] Outside [] Other Location of shoe(s) _____
Temp casing [X] Yes Dia 12 From 0 To 18

(7) PERFORATIONS/SCREENS
Perforations Method _____
Screens Type _____ Material _____
Table with columns: Perf/S, Casing/Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
[] Pump [] Bailer [X] Air [] Flowing Artesian
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
150 110 2
50 95 1
Temperature 46 °F Lab analysis [] Yes By _____
Water quality concerns? [] Yes (describe below)

Table with columns: From, To, Description, Amount, Units. Row: 75, 145, FINE GRAY PUMICE SAND

(9) LOCATION OF WELL (legal description)

County Klamath Twp 33.00 S N/S Range 7.50 E E/W WM
Sec 2 SW 1/4 of the SW 1/4 Tax Lot 100
Tax Map Number _____ Lot _____
Lat _____ ' _____ " or _____ DMS or DD
Long _____ ' _____ " or _____ DMS or DD
[] Street address of well [X] Nearest address

56101 SUN MT. RD.(V0000) FORT KLAMATH, OR

(10) STATIC WATER LEVEL

Table with columns: Date, SWL(psi), + SWL(ft). Rows for Existing Well / Predeepening and Completed Well (11-03-2008, 62).

Flowing Artesian? [] Dry Hole? []

WATER BEARING ZONES Depth water was first found 75

Table with columns: SWL Date, From, To, Est Flow, SWL(psi), + SWL(ft). Rows for 10-20-2008 and 11-03-2008.

(11) WELL LOG Ground Elevation 4,150

Table with columns: Material, From, To. Rows: Brown Pumice, White Pumice & Fine Gravel, White Pumice Rock & Streaks of Black Lava Rock, Gray Pumice, Gray Pumice with Streaks of Black & Brown Lava --, Rock & Red Cinders, Black & Brown Lava Rock & Red Cinders.

Date Started 10-16-2008 Completed 11-03-2008

(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.

License Number 1560 Date 11-04-2008
Electronically Filed
Signed JAMES B PINKARD (E-filed)

(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.

License Number 777 Date 11-04-2008
Electronically Filed
Signed STEPHEN R HUGHES (E-filed)
Contact Info (optional)

