STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)

01-29-2010

WELL LABEL # L	101451
START CARD#	1009338

(1) LAND OWNER Owner Well I.D.	(9) LOCATION OF WELL (legal description)								
First Name Last Name	County Klamath Twp 39.00 S N/S Range 10.00 E E/W WM								
Company T W C	Sec _7 _ SW _ 1/4 of the _NW _ 1/4 _ Tax Lot _1000								
Address 3647 HWY 39	Tax Map Number Lot								
City KLAMATH FALLS State OR Zip 97603	Lat o DMS or DD								
(2) TYPE OF WORK New Well Deepening Conversion Alteration (repair/recondition) Abandonment	Long or DMS or DD  Street address of well Nearest address								
(3) DRILL METHOD	3647 HWY. 39 KLAMATH FALLS, OR 97603								
Rotary Air Rotary Mud Cable Auger Cable Mud Reverse Rotary Other	(10) STATIC WATER LEVEL  Date SWL(psi) + SWL(ft)								
(4) PROPOSED USE Domestic Irrigation Community	Existing Well / Predeepening								
Industrial/ Commercial Livestock Dewatering	Completed Well								
Thermal Injection Other	Flowing Artesian? Dry Hole?								
(5) BORE HOLE CONSTRUCTION Special Standard Attach copy)	WATER BEARING ZONES  Depth water was first found  SWL Date From To Est Flow SWL(psi) + SWL(ft)								
Depth of Completed Well 84.00 ft.  BORE HOLE SEAL sacks/	SWL Date From To Est Flow SWL(psi) + SWL(ft)								
Dia From To Material From To Amt lbs									
8 0 84 Bentonite Chips 0 3 4 S									
	(11) WELL LOG Ground Elevation								
How was seal placed: Method A B C D E	Material From To								
Other Poured									
Backfill placed from ft. to ft. Material Filter pack from ft. to ft. Material Size									
Explosives used: Yes Type Amount Size									
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc Wld Thrd									
Casing Enier Troin to Gauge Sit Fiste Will find									
Share Traits Tourists Tourists Tourism of the (c)									
Shoe Inside Outside Other Location of shoe(s)  Temp casing Yes Dia From To									
(7) PERFORATIONS/SCREENS									
Perforations Method									
Screens Type Material									
Perf/S Casing/Screen Scrn/slot Slot # of Tele/creen Liner Dia From To width length slots pipe size	Date Started <u>01-28-2010</u> Completed <u>01-28-2010</u>								
	(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.								
(8) WELL TESTS: Minimum testing time is 1 hour	License Number Date								
Pump Bailer Air Flowing Artesian Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Electronically Filed Signed								
Tiene garriini Diawdown Dim steinri ump depui Daradon (iii)	(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								
Temperature °F Lab analysis Yes By Water quality concerns? Yes (describe below)	construction standards. This report is true to the best of my knowledge and belief.								
Water quality concerns?	License Number Date <u>01-29-2010</u>								
	Electronically Filed								
	Signed STEPHEN R HUGHES (E-filed)								
	Contact Info (optional)								

01-29-2010

START CARD # 1009338

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	Casing					C /-1 - 4	C1-4	# of	T-1-/								
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W	ater O	nalit	y Conce	erns							No drilling w depth.	as periormed	ı on unis well.	we meast	neu wen at 8	54 Ie	et totai
					D		Amo	unt II	nits		We raised the	e existing 8"	casing from -	3 feet to 1.5	feet above	oron	nd level
Fr	om	To	1		Descripti	ion	AIII	ount U	ints		c raisea alle	- Ansung 0		. 1001 10 1.3	1001 1100 10 }	51 Ou	10 101.
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