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

KLAM 57413

06-13-2010

Page 1 of 1

START CARD # 1009683

WELL LABEL # L 64053

(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 KNOLL RANCH	Sec <u>17</u> <u>NE</u> 1/4 of the <u>SE</u> 1/4 Tax Lot <u>2900</u>
Address 5429 REEDER ROAD	Tax Map Number Lot
City KLAMATH FALLS State OR Zip 97603	Lat ' ' or DMS or DD Long ' or DMS or DD
(2) TYPE OF WORK New Well Deepening Conversion	
Alteration (repair/recondition)	Street address of well Nearest address
(3) DRILL METHOD	5429 Reeder Road, Klamath Falls, OR 97601
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 03-04-2010
	Completed Well 04-14-2010 13
	Flowing Artesian? Dry Hole?
Thermal Injection Other	WATER BEARING ZONES Depth water was first found
(5) BORE HOLE CONSTRUCTION Special Standard (Attach copy)	SWL Date From To Est Flow SWL(psi) + SWL(ft)
Depth of Completed Well <u>1,531.00</u> ft. BORE HOLE SEAL sacks/	
BORE HOLE SEAL sacks/ Dia From To Material From To Amt Ibs	
	(11) WELL LOG Ground Elevation
How was seal placed: Method A B C D E	
	Material From To Reamed existing borehole from 12" to 19" from the bo 336 1 531
Other Not Disturbed Backfill placed from ft. to ft. Material	Keamed existing borehole from 12° to 19° from the bo 336 1,531
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	
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/	Date Started 03-17-2010 Completed 04-14-2010
creen Liner Dia From To width length slots pipe size	
	(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	Electronically Filed
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)	Signed
10,000 54 85 1,440	(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 <u>78</u> °F Lab analysis Yes By	construction standards. This report is true to the best of my knowledge and belief.
Water quality concerns? Yes (describe below)	
	License Number <u>1385</u> Date <u>06-13-2010</u> Electronically Filed
	Signed <u>ROBERT BUCKNER (E-filed)</u>
	Contact Info (optional)

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK