

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

(1) LAND OWNER Well Number 3
 Name The Klamath Tribes C/O Atkins Consulting Engineers, Inc.
 Address 2950 Shasta Way
 City Klamath Falls State OR Zip 97603

(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 286 ft.
 Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
15 1/2"	0	239	Cement	10	239	100 sks.
15 1/2"			Bent. Chips	0	10	9 sks.
12"	239	286				

How was seal placed: Method A B C D E
 Other

Backfill placed from _____ ft. to _____ ft. Material Colorado Sand
 Gravel placed from 232 ft. to 286 ft. Size of gravel 8 x 12

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	+3'	239	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8" Riser	231	244	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8" Tail	284	286	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type Alloy Material Stainless Steel

From	To	Slot Size	Number	Diameter	Tele/plpe size	Casing	Liner
244	284	35		8"	Pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
300	59'		3.5 Hrs.

Temperature of water 54° Depth Artesian Flow Found _____
 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: _____

(9) LOCATION OF WELL (legal description)
 County Klamath
 Tax Lot 1700 Lot _____
 Township 35 S N or S Range 7 E Por W WM
 Section 8 SE 1/4 SE 1/4

Lat _____° _____' _____" or _____ (degrees or decimal)
 Long _____° _____' _____" or _____ (degrees or decimal)

Street Address of Well (or nearest address) Road A off Hwy. 62, Chiloquin, OR

(10) STATIC WATER LEVEL
88' 6" ft. below land surface. Date 7-8-10
 _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

From	To	Estimated Flow Rate	SWL
244	284	150 GPM	88' 6"

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
Top soil	0	1	
Brown sandy clay	1	5	
Gravel & clay cemented	5	10	
Brown cemented gravel & sand	10	25	
Coarse sand & gravel, brown	25	45	
Cemented pea gravel & cobbles	45	53	
Brown silt stone	53	68	
Brown clay w/ gravel	68	75	
Cemented gravel	75	95	
Brown silty clay & gravel	95	135	

CONTINUED ON PAGE 2
 Date Started 6-25-10 Completed 7-8-10

(unbonded) Water Well Constructor Certification
 I certify that the work I performed on the construction, deepening, alteration, 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. **Gordon Millar**

WWC Number 1917 Date 7-20-10

Signed *Gordon Millar*

(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. **Ron Aspaas**

WWC Number 1445 Date 7-20-10

Signed *Ron Aspaas*

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OCT 19 2010

WATER RESOURCES DEPT
 SALEM, OREGON

RECEIVED

AUG 04 2010

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 Other

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

(5) BORE HOLE CONSTRUCTION Special Construction: Yes No
Depth of Completed Well 286 ft.
Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds
15 1/2"	0	239	Cement	10	239	100 sks.
15 1/2"			Pert. Chips	0	10	9 sks.
12"	239	286				

How was seal placed: Method A B C D E
 Other _____
Backfill placed from _____ ft. to _____ ft. Material Colorado Sand
Gravel placed from 239 ft. to 286 ft. Size of gravel 8 x 12

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	+3'	239	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
8" Riser	231	244	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
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Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

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Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS

Perforations Method _____
 Screens Type Alloy Material Stainless Steel

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
244	284	35		8"	Pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
300	59'		3.5 Hrs.

Temperature of water 54° Depth Artesian _____
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 OCT 19 2010
Depth of strata: _____

(9) LOCATION OF WELL (legal description)
County Klamath
Tax Lot 1700 Lot _____
Township 35 S N or S Range 7 E E or W WM
Section 8 SE 1/4 SE 1/4
Lat _____ " or _____ (degrees or decimal)
Long _____ " or _____ (degrees or decimal)
Street Address of Well (or nearest address) Road A off Hwy. 62, Chiloquin, OR

(10) STATIC WATER LEVEL
88' 6" ft. below land surface. Date 7-8-10
_____ ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES

Depth at which water was first found 244'

From	To	Estimated Flow Rate	SWL
244	284	150 GPM	88' 6"

(12) WELL LOG Ground Elevation _____

Material	From	To	SWL
CONTINUED FROM PAGE 1			
Brown clay & gravel	135	160	
Cemented sand	160	178	
Clay & gravel, brown	178	192	
Brown cemented gravel	192	200	
Clay & gravel, brown	200	232	
Gray clay	232	244	
Cemented black sand	244	284	
Silt stone, black	284	286	

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WWC Number 1917 Date 7-20-10
Signed _____

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 Explosives used: Yes No Type _____ Amount _____

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
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15 1/2"			Bent. Chips	0	10	9 sks.

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 Backfill placed from _____ ft. to _____ ft. Material _____
 Gravel placed from _____ ft. to _____ ft. Size of gravel _____

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 Township 35 S N or S Range 7 E E or W WM
 Section 8 SE 1/4 SE 1/4
 Lat _____ or _____ (degrees or decimal)
 Long _____ or _____ (degrees or decimal)
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	From	To	
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Brown sandy clay	1	5	
Gravel & clay cemented	5	10	
Brown cemented gravel & sand	10	25	
Coarse sand & gravel, brown	25	45	
Cemented pea gravel & cobbles	45	53	
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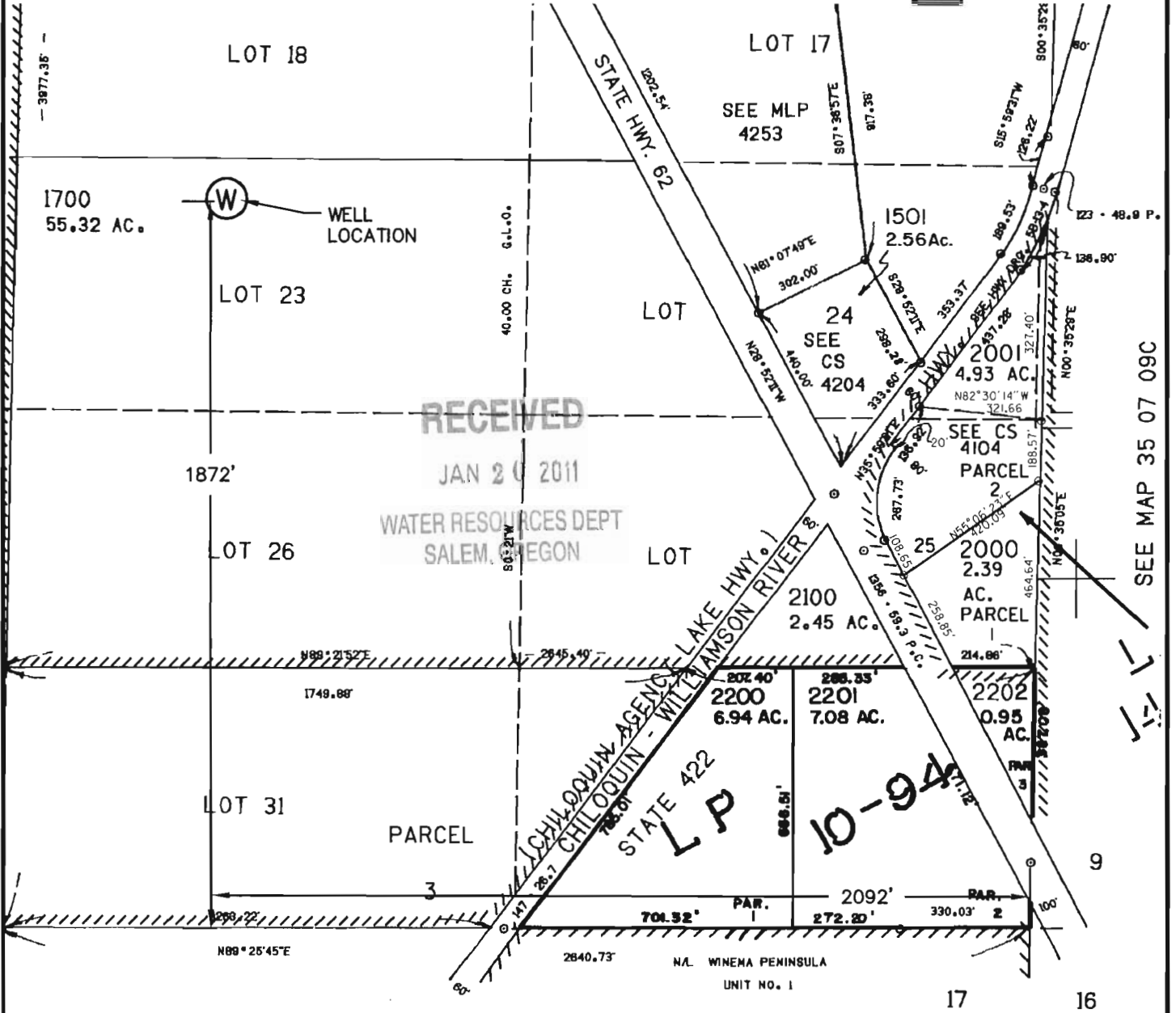


KLAM 57478

SECTION 08 T.35S. R.07E. W.M.
 KLAMATH COUNTY
 1"=400'



LAND OWNER SUBMITTED MAP



RECEIVED

JAN 20 2011

WATER RESOURCES DEPT
 SALEM, OREGON

CHILDOWN AGENCY
 CHILOQUIN - WILLAMSON RIVER
 STATE 422
 L P

10-94

SEE MAP 35 07 09C

SEE MAP 35 07 17A

35 07 08

NOTES: KLAMATH COUNTY TAX ASSESSORS MAP: 35 07 08
 COUNTY TAX LOT NUMBER: 1700, GOV'T LOT 23
 NO STREET ADDRESS AVAILABLE AT THIS TIME
 WELL IDENTIFICATION NUMBER: L76773, KLAM 57478
 WELL IS LOCATED 2,092' WEST AND 1,872' NORTH
 OF THE S.E. CORNER SEC 8, T35S, R07E W.M.

THE PURPOSE OF THIS MAP IS TO IDENTIFY
 THE LOCATION OF THE WELL ONLY, AND IS
 NOT INTENDED TO PROVIDE DIMENSIONS OR
 LOCATION OF THE PROPERTY LINES.

ADKINS
 SINCE 1983

CONSULTING
 ENGINEERS, INC.

Engineers ▲ Planners ▲ Surveyors

2950 Shasta Way · Klamath Falls, Oregon 97603 · (541) 884-4666 · FAX (541) 884-5335
 Klamath Falls, Oregon

1754-2602

WELL LOCATION MAP.DWG

1/14/11

**EXEMPT USE WELL MAP
 FOR
 THE KLAMATH TRIBES**

KLAMATH FALLS, OREGON