

KLAM 57551

WELL I.D. # L _____

(1) LAND OWNER Well Number Horton Well 4
 Name L. J. + Anne S. Horton
 Address Rt. 2, Box 798
 City Klamath Falls State OR Zip _____

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

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

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

(5) BORE HOLE CONSTRUCTION:
 Special Construction approval Yes No Depth of Completed Well 150 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	

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

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

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:	<u>16</u>				<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"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<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:

From		To		Slot size		Number		Diameter		Tele/pipe size		Casing	Liner
												<input 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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian	Time 1 hr.
			<input type="checkbox"/>	
			<input type="checkbox"/>	

Temperature of water _____ 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 by legal description:
 County Klamath Latitude _____ Longitude _____
 Township 39 S N or S Range 11.5 E E or W. WM.
 Section 10 NW 1/4 SE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____

(10) STATIC WATER LEVEL:
 _____ ft. below land surface. Date _____
 Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:

Ground Elevation _____

Material	From	To	SWL
Notes on the final-proof survey for permit G-1002 (Certificate 34895) indicate that the owner describes the well as 150 feet deep, 16-inch casing, SWL 6-12ft, & yield = 2800-3000 gpm. Information in file G-1195 suggests that the well was drilled in, or prior to, 1947. This well is also listed as Well 4 on permits G-12217 and G-12440. Depth and well construction information may not be reliable.			

Date started _____ Completed 1947

SOURCE OF DATA/INFO Water right file G-1195. This is the POA described on certificate 34895.

COMPILED BY: Karl Wozniak
Groundwater Section

DATE: Oct. 15, 2010