				// *		Page 1 of 1	
STATE OF OREGON	KLAM	58919	WELL I.D. LABEL				
WATER SUPPLY WELL REPORT			START CARD	# 1022788	·		
(as required by ORS 537.765 & OAR 690-205-0210)	10/28	/2014	ORIGINAL LOG	#			
(1) LAND OWNER Owner Well I.D.					I		
First Name SHIELD CREST GOLF Last Name	•		ION OF WELL (logo	l docorinti	on)		
Company NORCAL INVESTMENT PARTNERS		(9) LOCATION OF WELL (legal description) County <u>KLAMATH</u> Twp 39.00 <u>S</u> N/S Range 10.00 <u>E</u> E/W WM					
Address 7090 N MARKS SUITE #102							
City FRESNO State CA Zin 93711		Sec <u>8</u>	NE 1/4 of the NW	-1/4 Ta	x Lot <u>160</u>	0	
	version	Tax Map Numb	er or 42.19914	Lot	t		
Alteration (complete 2a & 10) Abandonment(complete 5a)		Lat°_	" or <u>42.19914</u>	000		DMS or DD	
(2a) PRE-ALTERATION		Long°	or	68000		DMS or DD	
Dia + From To Gauge Stl Plstc Wld Thrd		🔿 St	reet address of well 💿	Nearest addre	288		
Casing:		ARANT RD K	LAMATH FALLS, OR 976	03			
Material From To Amt sacks/lbs							
Seal:							
(3) DRILL METHOD	(10) STATE	C WATER LEVEL	ata GUU				
Rotary Air Rotary Mud Cable Auger Cable Mud		Existing W	Tell / Pre-Alteration	ate SWL((psi) +	SWL(ft)	
Reverse Rotary Other		Completed	Well 8/22/20	14	- - -	132.3	
(4) PROPOSED USE Domestic XIrrigation Community	1	completed	Flowing Artesian?		ole?	132.3	
						46.00	
Industrial/Commercial Livestock Dewatering WATER BEARING ZONES Depth water was first found 246.00							
Thermal Dijection Other		SWL Date	From To	Est Flow SV	VL(psi) ·	+ SWL(ft)	
(5) BORE HOLE CONSTRUCTION Special Standard	(Attach copy)	4/30/2014	246 249	15		173	
Depth of Completed Well <u>960.00</u> ft.		8/22/2014	847 960	800		132.25	
BORE HOLE SEAL	sacks/				ł		
Dia From To Material From To A	Amt lbs						
	300 S						
16 13 398				I	I I		
12 398 840 8 840 960		(11) WELL	LOG Council Floor				
			Glound Eleva	-			
	E	Dark Brown To	Material	F	From 0	<u>To</u>	
Other			1		2	46	
Backfill placed from ft. to ft. Material		Tan/Brown Clay Tight Grey Clay w/Small Gravel			46	61	
Filter pack from ft. to ft. MaterialSize		Tight Grey Clay			61	64	
Explosives used: Yes Type Amount		Grey Clay & Large Gravel			64	71	
(5a) ABANDONMENT USING UNHYDRATED BENTONI	ITE	Tight Grey Cla			71	246	
Proposed Amount Actual Amount		Brown/Grey Cl	ay w/Broken Claystone		246	307	
		Brown & Grey			307	386	
(6) CASING/LINER Casing Liner Dia + From To Gauge Stl Plstc	Wld Thrd		Green Claystone		386	401	
$\bigcirc \bigcirc 12 \times 2 398 .250 \bigcirc \bigcirc$		Grey/Green Cla			401	429	
●			ay Sm. Green Claystone		429	683	
	Dark Grey Claystone Black Basalt			683 732	732 933		
	Black/Brown Basalt			933	933		
	Black Basalt			947	960		
Shoe Inside Outside Other Location of shoe(s)		Diater Dusar				,00	
Temp casing X Yes Dia 16 From 0 To 13							
(7) PERFORATIONS/SCREENS Perforations Method							
Screens Type Material		Data Startad	4/28/2014 Co	mnlata o	/22/2014		
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/			Date Started <u>4/28/2014</u> Complete <u>8/22/2014</u>				
Screen 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.					
		License Numbe	er	Date			
(8) WELL TESTS: Minimum testing time is 1 hour		Signad					
Pump Bailer Air Flowing A	Artesian	Signed					
<u>Yield gal/minDrawdownDrawdown</u>		(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 dur	ing this time is in compli	ance with O	regon wat	er supply well	
Temperature 71 °F Lab analysis Yes By c			construction standards. This report is true to the best of my knowledge and belief.				
Water quality concerns? Yes (describe below) TDS amount From To Description Amount			License Number 1835 Date 10/28/2014				
	<u> </u>		IN D GILL (E-filed)				
	+	Contact Info (o	ptional) Clouser Drilling Inc				

ORIGINAL - WATER RESOURCES DEPARTMENT THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: