

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

KLAM 59974

3/7/2018

WELL I.D. LABEL# L

START CARD #

ORIGINAL LOG #

Table with well identification numbers: 122345, 1037971, KLAMATH, 59921

(1) LAND OWNER
Owner Well I.D.
First Name Last Name
Company WOOD RIVER DISTRICT IMPROVEMENT
Address PO BOX 503
City FORT KLAMATH State OR Zip 97626

(2) TYPE OF WORK
New Well [] Deepening [x] Conversion []
Alteration (complete 2a & 10) [] Abandonment(complete 5a) []

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrld
Casing: [] [] [] [] [] [] [] []
Material From To Amt sacks/lbs
Seal: [] [] [] [] [] [] [] []

(3) DRILL METHOD
Rotary Air [x] Rotary Mud [] Cable [] Auger [] Cable Mud []
Reverse Rotary [] Other []

(4) PROPOSED USE
Domestic [] Irrigation [x] Community []
Industrial/ Commercial [] Livestock [] Dewatering []
Thermal [] Injection [] Other []

(5) BORE HOLE CONSTRUCTION
Special Standard [] (Attach copy)
Depth of Completed Well 722.00 ft.
BORE HOLE
Dia From To Material From To Amt sacks/lbs

How was seal placed: Method [] A [] B [] C [] D [] E []
[X] Other NOT DISTURBED
Backfill placed from [] ft. to [] ft. Material []
Filter pack from [] ft. to [] ft. Material [] Size []
Explosives used: [] Yes Type [] Amount []

(5a) ABANDONMENT USING UNHYDRATED BENTONITE
Proposed Amount Actual Amount

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thrld
Shoe [] Inside [] Outside [] Other [] Location of shoe(s) []
Temp casing [] Yes Dia From + [] To []

(7) PERFORATIONS/SCREENS
Perforations Method []
Screens Type [] Material []
Perf/ Casing/ Screen Screen Liner Dia From To Scrn/slot width Slot length # of slots Tele/ pipe size

(8) WELL TESTS: Minimum testing time is 1 hour
Pump [] Bailer [] Air [x] Flowing Artesian []
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
2500 [] 720 [] 1 []
Temperature 42 °F Lab analysis [] Yes By []
Water quality concerns? [] Yes (describe below) TDS amount 52 mg/L
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County KLAMATH Twp 33.00 S N/S Range 7.50 E E/W WM
Sec 16 NW 1/4 of the SW 1/4 Tax Lot 1200
Tax Map Number [] Lot []
Lat [] " or 42.71099900 DMS or DD
Long [] " or -122.01562600 DMS or DD
Street address of well [] Nearest address []
NICHOLSON ROAD, FORT KLAMATH, OREGON

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration 3/1/2018 2.5 [x] 5.8
Completed Well 3/5/2018 2.5 [x] 5.8
Flowing Artesian? [x] Dry Hole? []

WATER BEARING ZONES
Depth water was first found
SWL Date From To Est Flow SWL(psi) + SWL(ft)
3/5/2018 657 722 5000 2.5 [x]

(11) WELL LOG
Ground Elevation []
Material From To
Existing Well 0 657
Hard Black & Gray Basalt 657 710
Broken Black Basalt & Black Sand 710 722

Date Started 3/1/2018 Completed 3/5/2018

(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 Number [] Date []
Signed []

(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.
License Number 1385 Date 3/7/2018
Signed ROBERT BUCKNER (E-filed)
Contact Info (optional) []

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

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Map of Hole

