

STATE OF OREGON
WATER SUPPLY WELL REPORT

KLAM 61928

WELL I.D. LABEL# L

Page 1 of 3

153856

START CARD #

1074098

ORIGINAL LOG #

(as required by ORS 537.545 & 537.765 and OAR 690-205-0210)

7/11/2024

(1) LAND OWNER

Owner Well I.D.

First Name LONNIE & REBA Last Name STARNES

Company _____

Address 7146 BLY MOUNTAIN CUTOFF

City BONANZA State OR Zip 97623

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion

☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd

Material From To Amt sacks/lbs

Seal: _____

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud

☐ Reverse Rotary ☐ Other _____

(4) PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Community

☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering

☐ Thermal ☐ Injection ☐ Other _____

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 374.00 ft.

BORE HOLE

Dia	From	To	Material	From	To	Amt	sacks/lbs
12	0	38	Bentonite Chips	0	38	29	S
6	38	374			Calculated	24	
					Calculated		

Seal placement method: ☐ A ☐ B ☐ C ☐ D ☐ E ☒ Other: POURED DRY

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Type _____ Amount _____

Seal Placement Begin Date 6/17/2024 Begin Time 18 33

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount

Actual Amount

(6) CASING/LINER

C/L	Dia	+ From	To	Gauge	Mat. Type	Wld	Thrd	Shoe	Location
C	6	☒ 2	38	.250	ST	☒		OUT.	38
L	4	☐ 5.5	365.5	.250	PL	☐	☒		

Temp casing ☐ Yes Dia _____ From + _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method _____

Screens Type factory Material pvc

Perf/ Screen	Casing/ Liner	Dia	From	To	Scrm/slot width	Slot length	# of slots	Tele/ Pipe size
Screen	Liner	4	345.5	365.5	.032	3		

(8) WELL TESTS: Minimum testing time is 1 hour

Type of Test	Yield (gal/min)	Drawdown	Drill Stem/ Pump Depth	Duration (hr)
Air	15		320	1

Temperature 58 °F Lab analysis ☐ Yes By _____

Water quality concerns? ☐ Yes (describe below) TDS amount 197 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County KLAMATH Twp 38.00 S N/S Range 11.00 E E/W WM

Sec 10 NW 1/4 of the SW 1/4 Tax Lot 3400

Tax Map Number _____ Lot _____

Lat _____ " or 42.28778000 DMS or DD

Long _____ " or -121.40696000 DMS or DD

☒ Street address of well ☐ Nearest address

7146 BLY MOUNTAIN CUTOFF, BONANZA, OR 97623

(10) STATIC WATER LEVEL

	Date	SWL (psi)	+	SWL (ft)
Existing Well / Pre-Alteration				
Completed Well	<u>7/11/2024</u>			<u>283</u>
Flowing Artesian?	☐			
Dry Hole?	☐			

WATER BEARING ZONES

Depth water was first found 300.00

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>7/11/2024</u>	<u>300</u>	<u>374</u>	<u>15</u>			<u>283</u>

(11) WELL LOG

Ground Elevation _____

Material	From	To
topsoil	0	2
brown sandstone	2	26
grey sandstone	26	45
sandy tan clay	45	51
grey broken lava	51	67
red lava	67	75
brown lava	75	88
grey basalt	88	194
red lava	194	203
grey basalt with broken layers/voids	203	374

Construction

Begin Date 6/17/2024 Begin Time 07 41 End Date 7/11/2024

(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 1940 Date 7/11/2024

Signed BENJAMIN FRY (E-filed)

(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 1355 Date 7/11/2024

Signed ARTHUR FRY (E-filed)

Drilling Company: Fry Industries Inc.

ORIGINAL - WATER RESOURCES DEPARTMENT

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

New exempt use wells must be submitted with a map and recording fee.

Lost circulation zones 108, 212, 221, 246, 283

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

KLAM 61928

7/11/2024

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department

725 Summer St NE, Salem OR 97301
(503)986-0900



LOCATION OF WELL

Latitude: 42.28778000 Datum: WGS84

Longitude: -121.40696000

Township/Range/Section/Quarter-Quarter Section:

WM38.00S11.00E10NSW

Address of Well:

7146 BLY MOUNTAIN CUTOFF, BONANZA, OR 97623

Well Label: 153856

Printed: July 11, 2024

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor

