

The original and first copy of this report are to be filed with the

RECEIVED OCT 10 1969

STATE ENGINEER, SALEM, OREGON 97310

within 30 days from the date of well completion.

STATE OF OREGON STATE ENGINEER SALEM, OREGON

WATER WELL REPORT

Klam 954

State Well No. 34/7-2210 4 State Permit No.

(1) OWNER:

Name Mr & Mrs Walter Reed Address Chiloquin, Oregon

(2) TYPE OF WORK (check):

New Well [X] Deepening [] Reconditioning [] Abandon []

(3) TYPE OF WELL:

Rotary [] Driven [] Cable [] Jetted [] Bored []

(4) PROPOSED USE (check):

Domestic [X] Industrial [] Municipal [] Irrigation [] Test Well [] Other []

(5) CASING INSTALLED:

6 5/8" Diam. from 0 ft. to 21 ft. Gage 250

(6) PERFORATIONS:

Perforated? [] Yes [X] No. Type of perforator used. Size of perforations in. by in.

(7) SCREENS:

Well screen installed? [] Yes [X] No. Manufacturer's Name, Type, Model No., Diam., Slot size, Set from ft. to ft.

(8) WATER LEVEL: Completed well.

Level 17 ft. below land surface Date 9/29/69. Artesian pressure lbs. per square inch Date

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level. Was a pump test made? [] Yes [X] No. Bailer test 69 gal./min. with 5 ft. drawdown after 2 hrs.

(10) CONSTRUCTION:

Well seal—Material used Cement. Depth of seal 20 ft. Diameter of well bore to bottom of seal 8 in. Were any loose strata cemented off? [] Yes [X] No. Was a drive shoe used? [] Yes [X] No. Did any strata contain unusable water? [] Yes [X] No. Type of water? depth of strata. Method of sealing strata off. Was well gravel packed? [] Yes [X] No. Size of gravel: Gravel placed from ft. to ft.

(11) LOCATION OF WELL:

County Klamath Driller's well number Sw 1/4 SE 1/4 Section 33 T. 34 R. 7 E W.M.

Bearing and distance from section or subdivision corner 800 feet West of HY 97 7/8 mi 300 feet East of North Property Line

(12) WELL LOG:

Diameter of well below casing 6 5/8. Depth drilled 290 ft. Depth of completed well 290 ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level as drilling proceeds. Note drilling rates.

Table with columns: MATERIAL, From, To, SWL. Rows include Top Soil brown, Boulders, White chalk (water), Blue chalk, Green chalk (water), Black Sand & gravel, Green grey chalk, Brown clay, Red & black lava rock, Lava rock (allcuttings washed away).

Work started 9/23 19 69 Completed 9/29 19 69. Date well drilling machine moved off of well 9/30 19 69

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief. [Signed] Walter J. Wilson Date 10/7 19 69 (Drilling Machine Operator)

Drilling Machine Operator's License No. 201

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. NAME WILSON DRILLING CONTRACTOR (Person, firm or corporation) (Type or print) Address P.O. Box 136, Merrill, Oregon 97633. [Signed] Walter J. Wilson (Water Well Contractor) Contractor's License No. 169 Date 10/7 19 69



mail to
 Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem Oregon 97301
 (503) 986-0900
 www.wrd.state.or.us

Application for Well ID Number

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FEB 05 2018

Do not complete if the well already has a Well Identification Number.

OWRD

I. OWNER INFORMATION

Current Owner Name (please print): BABETTE A Beckwith & GAIL L GRAHAM
 Mailing Address: P.O. Box 243
 City, State, Zip: Chiloquin OR 97624
 Mail Well ID Tag to: SAME AS ABOVE In Care Of (C/O)
 Name & Address: GAIL L. GRAHAM
 City, State, Zip: P.O. Box 243 Chiloquin OR 97624

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 35 (North/South) Range: 7 (East/West) Section: 4A0 NW 1/4 of the NE 1/4
 Tax Lot (usually last 3-5 numbers of Tax Map #): 700 County Klamath
 GPS Coordinates: _____
 Street Address of Well, City: 38400 Hwy 97 N Chiloquin OR 97624
 If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Log, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): _____
 Date Well Constructed (or property built): 9/29/69 Total Well Depth: 290' Casing Diameter: SEE ATTACHED
 Owner at time the well was constructed (if known): _____ Well Log # (if known): KLAM 954
 Other Information: Looking at Klamath Assessor's website and the ownership matches up with the well log. Wrong legal on well log.
 SUBMITTED BY (please print): GAIL L. GRAHAM
 PHONE: 541-783-2537 EMAIL &/or FAX: gailg14@live.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.
 Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

For Official Use Only by the Oregon Water Resources Department:

Received Date:

2-5-18

Well Log Number:

KLAM 954

Well Identification #:

L-129013