

WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form

Klam
52241

WELL ID # L36204

(START CARD) # 108648

(1) OWNER:

Well Number: _____

Name **DAVE MATHES**Address **20954 SOUTH POE VALLEY RD.**City **KLAMATH FALLS** State **OR** Zip **97603**

(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 **371** ft.Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE			SEAL			Amount	
Diameter	From	To	Material	From	To	sacks or pounds	
10	0	57	CEMENT &	0		12 SACKS	
6	57	371	BENTONITE		57	1 SACK	

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:	6	+1	59	.250	☒	☐	☒	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
					☐	☐	☐	☐
Liner:	NONE				☐	☐	☐	☐

Final location of shoe(s) **NONE**

(7) PERFORATIONS/SCREENS:

☐ PerforationsMethod **NONE**☐ Screens

Type _____

Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
NONE						☐	☐
						☐	☐
						☐	☐
						☐	☐

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

☐ Pump ☐ Baller ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
10 GPM		250 FT.	1 hr.

Temperature of Water **57 F** Depth Artesian Flow found **NONE**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: **NONE**

(9) LOCATION OF WELL by legal description:

County **KLAMATH** Latitude _____ Longitude _____
Township **39S** N or S. Range **11.5E** E or W. of WM.
Section **33** **SE** 1/4 **SW** 1/4
Tax lot **800** Lot _____ Block _____ Subdivision _____Street Address of Well (or nearest address) **20954 SOUTH POE VALLEY RD. KLAMATH FALLS, OR**

(10) STATIC WATER LEVEL:

42 ft. below land surface. Date **4/26/2000**
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found **40 FT.**

From	To	Estimated Flow Rate	SWL
40	48	7 GPM	12
138	250	8 GPM	42
314	326	4 GPM	42

(12) WELL LOG:

Ground elevation **4125**

Material	From	To	SWL
TOP SOIL	0	2	
SANDY BROWN CLAY	2	10	
BROWN CLAY	10	19	
GRAY CLAY	19	40	
GRAY CLAY & BLACK SAND	40	48	12
GRAY CLAY	48	138	
GRAY CLAY W/STREAKS OF BLACK SAND	138		
& WHITE PUMICE		250	42
GRAY CLAY	250	314	
GRAY CLAY WITH STREAKS OF BLACK	314		
SANDSTONE & SAND		326	42
GRAY CLAY	326	371	

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MAY 01 2000

WATER RESOURCES DEPT.
SALEM, OREGONDate started **4/25/2000**Completed **4/26/2000**

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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 my best knowledge and belief.

Signed **J. Buck Pindard** WWC Number **1560**
Date **4-28-00**

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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.

Signed **Stephen R. Hughes** WWC Number **777**
Date **4-28-00**