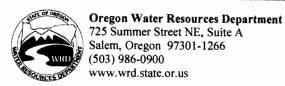
Application for Water Right

Transfer

Part 1 of 4 - Minimum Requirements Checklist



This transfer application will be returned if Parts 1 through 4 and all required attachments are not completed and included. For questions, please call (503) 986-0900, and ask for Transfer Section.

FOR ALL TRANSFER APPLICATIONS

_	ck all iter	ns included with this application. (N/A = Not Applicable) RECEIVED
		Part 1 – Completed Minimum Requirements Checklist. SEP 22 2011
X		Part 2 – Completed Transfer Application Map Checklist. WATER RESOURCES DEPT
X		Part 3 – Completed Transfer Application – Applicant Information and SAGEM, OREGON
X		Part 4 – Completed Transfer Application – Water Right Information. Please include a separate Part 4 for each water right. List all water right certificates to be transferred here:
		Attachments: RECEIVED
X		Completed Transfer Application Map. OVER THE COUNTER
X		Completed Evidence of Use Affidavit and supporting documentation.
X		Fees – Amount enclosed: \$ \(\frac{19\infty}{20} \). See the Department's Fee Schedule at \(\frac{\text{www.wrd.state.or.us}}{20} \) or call (503) 986-0883.
	N/A	Affidavit(s) of Consent.
	N/A	Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
Ø	N/A	Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if all of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
X	∏ N/A	For changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation, Water Well Report/Well Log.
	N/A	For Temporary Transfer (one to five years) Begin Year End Year
	N/A	For Temporary Transfer only – Current recorded deed for the land from which the authorized place of use is being moved.
	N/A	Temporary Drought Transfer (For use in counties where the Governor has declared drought)
1 1 0		(For Staff Use Only) ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete r/Explanation 503-986-0 Date: /

SEP 22 2011

WATER RESOURCES DEPT

Your transfer application will be returned if any of the map requirements listed below are not met.

		he existing water right map. Check all boxes that apply.
X	□ N/A	Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://www1.wrd.state.or.us/pdfs/cwre_listing.pdf . CWRE stamp and signature are not required for temporary changes and substitutions.
	N/A	If more than three water rights are involved, separate maps are needed for each water right.
X		Permanent quality printed with dark ink on white or clear paper or film.
Ø		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, or up to 30 x 30 inches. For 30 x 30 inch maps, three (3) paper copies and an electronic copy in a .pdf, .tiff or .jpg format are required.
X		A north arrow, a legend, and scale.
Ø		The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$, $1 \text{ inch} = 1,320 \text{ feet}$, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$, or a scale that has been pre-approved by the Department.
Ø		Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines.
Ø,		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
Ø		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
	NA	Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
¥		Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
Ø	□ N/A	Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
ĮŽ		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
12	□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example $-42^{\circ}32'15.5"$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

T

Part 3 of 4 - Applicant Information and Signature

APPLICANT/BUSINESS NAME		141111	PHONE NO.	ADDITIONAL CONTACT NO
STEUCN V ? CONSTA DDRESS	NCE A	, JOHNSON	503779 1604	\$03781 3:170 FAX NO.
10404 HATELGR				503 77 9 1667
IN ERTON	STATE	21P 97381	E-MAIL @)	vipsinc net
ent Information – The age			4	
GENT/BUSINESS NAME	- sautife		PHONE NO.	ADDITIONAL CONTACT NO
DDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	
Please send all corres Check this box if this pr Reinvestment Act. (Fed	oject is fu	ılly or partially f		C
s the applicant the sole ow	ner of the	iand on which it	ie water right, or bori	
ransfer is located? \(\sum \) Yes If NO, include signature attach affidavits of cons which the water right(s)	No es of all la ent (and n	ndowners (and r	nailing address if diff	erent than the applican
attach affidavits of cons	Perma understand ransfer, I w sfer as iden nicipality as a predecesse an entity with	ndowners (and railing addresses conveyed. nent Transfers Only that, upon receipt of the required to protified in OAR 690-3 defined in ORS 54 for; OR	nailing address if differs) from all landowners (check one box) of the draft preliminary decovide landownership information (80-4010(5); OR (0.510(3)(b) and that the sondemn property and is a	etermination and prior to remation and evidence that I right is in the SEP 2

Check the following boxes t	ոսւ սիեն	y:								
The applicant is responded to be sent to	onsible for the app	or comple	etion of c	hange(s). N	Notices a	and correspondence should				
The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.										
The receiving lando of notices and corres	wner and spondence	applicant e should b	will be rose sent to	esponsible this landov	for componer	pletion of change(s). Copie the applicant.				
At this time, are the lands in	n this tran	sfer appli	cation in	the process	of being	g sold? Yes No				
If YES, and you know v	who the not. If you o	ew landov lo not kno	wner will ow who t	be, please	complete	e the receiving landowner will be, then a request for				
If a property sells, the counless a sale agreement please visit our web site	or other o	locument	states otl	nerwise. (T	o learn a	ong to the new owner, about sale agreements Property Transactions.pdf)				
RECEIVING LANDOWNER NAME LINDA L. T. ROYAL T.	HAR	GER	!	PHONE NO. 54/-926	8164					
ADDRESS 2905 ALEXANI	DER L	344	NE.			FAX NO.				
CITY ALBAWY	STATE	973		E-MAIL Tlatfo	-ance	ashotmail.com				
Check here if any of the an irrigation or other wa	water rig	hts proposit. (Tip : C	sed for tr Complete	ansfer are o and attach	r will be Supplen	e located within or served by nental Form D.)				
CITY			STATE			ZIP				
Check here if water for a for stored water with a f					service	agreement or other contract				
ENTITY NAME			ADDRESS							
CITY			STATE			ZIP				
To meet State Land Use Cocity, municipal corporation, conveyed or used.										
ENTITY NAME ARION CO	0 NT9	20	ADDRESS	55- S	WERT	on RD.				
CITY S ALEM		10.								
			STATE	15		9730S				
ENTITY NAME						9730S				
ENTITY NAME CITY						ZIP				

Please use additional pages of Table 2 as needed

Table 2. Description of Changes to Water Right Certificate # 86681

List only the part of the right that will be changed. For the acreage in each 1/4 1/4, list the change proposed. If more than one change, specify the acreage associated with each change. If more than one POD/POA, specify the acreage associated with each POD/POA.

	Authorized ("from" lands) as they appear BEFORE THE CHANGES Propose							Proposed	Proposed ("to" lands) AFTER THE CHANGES					IGES												
Tv	wp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Date	CI	Twp	,	Rng	Se	С	1/4 1	/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date
7	s	2	w	29	sw	NW	201	80	9.8	Irrigation	Well #2	6/24/92	POU/POA	6 5	8	1 V	V 19	9	SW	NE	700		0.5	Irrigation	Well (To Area #2)	6/24/92
7	s	2	w	29	SE	NW	201	80	1.6	Irrigation	Well #2	6/24/92	POU/POA	6 5	S	1 V	/ 19	9	SW	NE	700	57	2.8	Irrigation	Well (To Area #2)	6/24/92
7	S	2	w	29	NE	sw	201	77	0.9	Irrigation	Well #2	6/24/92	POU/POA	6 5	S	1 V	/ 19)	SE	NW	700	57	11.9	Irrigation	Well (To Area #2)	6/24/92
7	S	2	w	29	NW	SW	201	77	3.2	Irrigation	Well #2	6/24/92	POU/POA	6 5	S	1 V	/ 19	1	NW .	SE	700	6	0.3	Irrigation	Well (To Area #2)	6/24/92
																			_				_			
												_			_					_						
	_								_								1			_						
									_								_			_						
	TOTAL ACRES 15.5													T	OTA	L AC	RES	15.5								

Additional remarks: SEP 2 2012 C WATER RESOURCES DEPT SALEM, OREGOING

Part 4 of 4 - Water Right Information

Please use a separate Part 4 for each water right being changed. See instructions at http://www.wrd.state.or.us/OWRD/PUBS/forms.shtml.

CERTIFICATE # <u>86681</u>

	iption of Water	• •				<i>(</i> 0 <i>)</i>	× Refer to Water Right Certificates 82388 Claim of Benjeral Luce								
Systen	n capacity:						OR	Ċ	ert	Eccal	88568 Hay				
		gallons per minute (gpm) current water delivery system or the system that was in place at some time within the last													
five ye		formation on	the	pum	ps, c	anals			_		ome time within the last used to divert, convey				
(POA)					-		, ,			•	o) or Appropriation number here.)				
POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	IFPOA, OWRD Well Log fD# (or Well ID Tag # L)	T	W p	1	ing	Sec	V.	4	Tex Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)				
WELL #2	□ Authorized □ Proposed	MARI 17259	7	S	2	w	29	NW	SW	77	1450 FEET NORTH AND 1620 FEET WEST FROM THE M OST NORTHERLY CORNER, DLC 75				
WELL (TO AREA #2)	☐ Authorized ☐ Proposed	MARI 3241	6	S	1	w	19	SW	NE	57	950 FEET NORTH AND 1500 FEET WEST FROM THE SE CORNER, DLC 57				
	Authorized								_						
	☐ Proposed ☐ Authorized ☐ Proposed														
Check	all type(s) of o	change(s) pr	onos	ed b	elov	v (ch	ange '	"COD	ES" a	are pro	vided in parentheses):				
X	Place of Use		орол	~		. (***					Primary Use (S to P)				
	Character of	, ,				,		Point o	of App	ropriati	on/Well (POA)				
	Point of Div	ersion (POD))			/		Additi	onal P	oint of	Appropriation (APOA)				
	Additional P	oint of Dive	rsion	(AF	OD)		Substit	ution	(SUB)					
	Surface Wat POA (SW/G	er POD to Gr W)	roun	d W	ater			Gover	nment	Action	POD (GOV)				
Will a	ll of the propo	sed changes	affe	ct th	e en	tire	water	right	?						
☐ Ye		nly the Propos sted above to								n the ne	ext page. Use the				
No	Complete al	l of Table 2 to	o de	scrib	e the	e por	tion of	f the w	ater r	ight to b	e change RECEIVED				
/											CED 00 2011				

SEP 22 2011

rtificato # 810 681

	For Pla	ce of Use or C	haracte	r of Use C	hanges		Ce	ertificate #	0 4 4	<u>5 </u>
	Are th with th	ere other water he "from" or th	right ce e "to" la	rtificates, nds? 🔲 Y	water use Yes XN	e permits o	r ground w	ater registr	rations asso	ciated
		S, list the certif			•		er registrati	ion number	rs:	
	a prim	ant to ORS 540 ary right proporound water reg	sed for t	ransfer mi	ust be inc	luded in th	e transfer o	or be cance	elled. Any o	hange
-	For Sub	ostitution (grou	nd wate	r supplem	ental irrig	gation will	be substitu	ted for sur	face water p	orimary
		d water suppler e water primar				#;				
]	For a ch	ange from Su	pplemer	ıtal Irriga	ition Use	to Primar	y Irrigatio	on Use		
	Identif	y the primary o	ertificat	e to be car	ncelled. (Certificate	#			
]	For a ch	ange in point(s) of ap	propriatio	on (well(s	s)) or addi	tional poin	ıt(s) of apı	propriation	l :
	a	Vell log(s) are a ssociated with pplication map ttp://apps2.wrd	the corre	esponding You may s	well(s) in search for	n Table 1 a well logs	bove and o on the Dep	n the acco	mpanying	
	OR									
		Describe the cor to not have a we		n of the au	ıthorized	and propos	sed well(s)	in Table 3	for any we	lls that
Any well(accompan ransfer ap	s) in this ying app oplicatio	ction of Point(s listing must be olication map. n. For propose the examiner for	e clearly Failure t d wells,	tied to co o provide we recom	rrespond adequate mend tha	information in the information i	on is likely ult a licens	to delay the d well dri	ne processin	g of your
Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	well, OWRD Well ID Tag	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right

RECEIVED

11299

SEP 22 2011

STATE OF OREGON

Did any strata contain water not suitable for intended usa? Too little

☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other

Danik of strate.



WATER WELL REPORT (START CARD) # (as required by ORS 537.765) 984) LOCATION OF WELL by legal description: (1) OWNER: County Marion Latitude ______ TOWNSHIPT - S Nor S. Range. Address 255 PRISOREGON 29 Salem (2) TYPE OF WORK: Subdivision Street Address of Well (or nearest address) 255 🔀 New Well ☐ Deepen Recondition ☐ Abandon Salem OREGOR (3) DRILL METHOD (10) STATIC WATER LEVEL: Rotary Air Rotary Mud X Cable Other ft. below land surface. (4) PROPOSED USE: Artesian pressure lb. per square inch. ☐ Community ☐ Industrial Irrigation . Domestic (11) WATER BEARING ZONES: Other ☐ Thermal Injection Depth at which water was first found . (5) BORE HOLE CONSTRUCTION: Depth of Completed Well 180 ft. pecial Construction approval Yes No From Estimated Flow Rate X 40 100 t Ż Type HOLE Amount Material From sacks or pounds Cement 34 (12) WELL LOG: bentonite Ground elevation . Material From To 33 180 0 Z C □ D 3 Other _ 12 3 ___ ft. to _____ ft. Backfill placed from ____ Material 12 24 __ fL. Gravel placed from _ _ft. to _ 24 3 (6) CASING/LINER: 31 48 Diameter From To Gauge Steel Plastic Welded Threaded 48 X X 66 70 80 80 82 82 108 \Box 108 inal location of shoe(s) _ PERFORATIONS/SCREENS: 114 Method Mills 130 140 Perforations 140 155 ☐ Screens ecomposed rock 155 160 Tele/pipe Number Diameter Casing Liner From 160 180 rack 20110 Date started 3-20- 91 Completed 4 - 29 -9/ WATER RESOURCES DEP (unbonded) Water Well Constructor Certification: (8) WELL TESTS: Minimum testing tim SALENLO REGON I certify that the work I performed on the construction, alterat abandonment of this well is in compliance with Oregon well const Artesian ☐ Pump 🛭 Bailer ☐ Air standards. Materials used and information reported above are true to a knowledge and belief. Yield gal/min Drawdown Drill stem at Time WWC Number 1 hr. Signed _ (bonded) Water Well Constructor Certification: I accept responsibility for the construction, alteration, or abando . Depth Artesian Flow Found . work performed on this well during the construction dates reported at Yes By whom Was a water analysis done?

work performed during this time is in compliance with Orego construction standards. This report is true to the best of my knowled belief.

Date 4/30 /9

The ofiginal and first copy of this report A are to be filed with the	L REPOECE SUED
WATER RESOURCES DEPARTMENT. STATE OF	OREGON MAY 1 3 1877 State Well No. 63/1w-19
SALEM, OREGON 97310 (Please type	e or print)
of well completion. (Do not write a	SALEM OREGON
(1) OWNER:	(10) LOCATION OF WELL:
Name Ruehen Ditchen	` u/
Address 9712 NUSON RONE	19-15 111
Silverton Ore 97381	
(2) TYPE OF WORK (check):	Bearing and distance from section or subdivision corner
New Well Deepening Reconditioning Abandon	
If abandonment, describe material and procedure in Item 12.	(11) THATTED I WITH CO. I. I. I.
(3) TYPE OF WELL: (4) PROPOSED USE (check):	(11) WATER LEVEL: Completed well. Depth at which water was first found / 79'
Rotary Driven Domestic Industrial Municipal	1/2
Cable Z Jetted Dug Bored Irrigation Z Test Well Other	Artesian pressure ft. below land surface, Date//a/// Artesian pressure lbs. per square inch. Date
CASING INSTALLED: Threaded Welded	(12) WELL LOG: Diameter of well below corder 12
12 " Diam from + 1 to 224 it Gage 1250	Damieter of well below casing
ft. toft. Gage	
Tlam, from ft. to ft. Gage	Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated,
PERFORATIONS: Perforated? Yes No.	with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.
Type of perforator used MillS	
7/-	MATERIAL From To SWL
Size of perforations 18 in. by 5 in. 336 perforations from 155 ft to 169 ft	Topsoil 6, 1
16/61	Sordy brown clay 1 36'
//C/ perforations from / 200 ft to /// ft	brue clay
	black sand Fine 71 95
(7) SCREENS: Well screen installed? Yes No	blacksandcoare passovel 95' 104'
Manufacturer's Name	909 C/94 - 1/3
TypeModel No.	peadrovel-gobbels Losse 1/3 1251 55
Diam. Slot size Set from it to ft.	black sond coorse 125, 127
Diam. Slot size Set from ft.	graycloy+grovelssmoll-med 127 149
(8) WELL TESTS: Drawdown is amount water level is lowered below static level	Loose gravels med-small 152157 55
Was a pump test made? ☐ Yes ☐ No If yes, by whom?	coorse brown sand
1: 6/0 gal./min. with /55 ft. drawdown after hrs.	tight grovels small med 157 /63
	osegravels.small-mexcourse 163 169 55
*	brown sand
Bailer test gal /min. with ft. drawdown after hrs.	gravels small-med withchy 169 179
Artesian flow g.p.m.	Plagravel - med coarse bruen 186 191
erature of water Depth artesian flow encountered ft.	Work started ASS' / / 1977 Complete May 4 1977
(9) CONSTRUCTION:	Date well drilling machine moved off of well 187
Well seal-Material used Bentonite	Drilling Machine Operator's Certification:
Well sealed from land surface toft.	This well was constructed under my direct supervision.
Diameter of well bore to bottom of sealin.	Materials used and information reported above are true to my best knowledge and belief.
Diameter of well bore below seal in. Bentony	[Signed] Date Date
Number of sacks of cement used in well said 2005	(Drilling Machine Operator)
How was cement grout placed?	Drilling Machine Operator's License No.
2	Water Well Contractor's Certification:
	This well was drilled under my jurisdiction and this report is
Was a drive shoe used? XYes [] No Flugs RECENTED ft.	true to the best of my knowledge and belief.
Did any strata contain unusable water?	Name FOLA WELL DRILLING (Type or print)
Type of water? depth of strata SEP 22 2011	Address SALEM OR #1988
Method of sealing strata off	[Signed] Harry & Rand
Was well gravel packed? Yes XNo SWATER RESOURCES DEP	(Water Well Contractor)
Gravel placed from the SALEM OREGON	Contractor's License No. 619 Date 5-5
(USE ADDITIONAL SH	EETS IF NECESSARY) SP*4555-119
The Assert	
	1.16 1 Am - 1 - 1 - 1

NOTICE TO WATER WELL CONTRACTOR

NOTICE TO WATER WELL CONTRACTOR

The buildinal and first copy of this report

are to be filed with the

WATER RESOURCES DEPARTMENT,

SALEM, OREGON 97310

within 30 days from the date of well completion.

WATER WELL REPORT

STATE OF OREGON

(Please type or print)

(Do not write above this line)

Bage 2 of 2	
State Well No.	_
State Permit No.	-

W. (20 101 1111 1	sove this mie)		Τ),	
(1) OWNER: Name Rueben Ditchem	(10) LOCATION OF WELL,	_		_
Address 97/2 NUSON R& NE	County Marion priller's well no	")	
Silverton Ore 97381	14 14 Section /9 T. 65	R. /4		W.M.
(2) TYPE OF WORK (check):	Bearing and distance from section or subdivisi	on corne	<u> </u>	
New Well Deepening □ Reconditioning □ Abandon □				
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL, Completed to			
(3) TYPE OF WELL: (4) PROPOSED USE (check):	(11) WATER LEVEL: completed w	a.,		
Rotary Driven Domestic To Industrial To Municipal To	Depth at which water was first found Static level ft below land	7	Dota 5	R.
Cable Jetted Jett				
	Artesian pressure Ibs. per squar	e nich.	Date	
CASING INSTALLED: Threaded Welded	(12) WELL LOG: Digmeter of well 1	oelow cas	ting	2"
"Diam. fromft. toft. Gage	Depth drilled 230 n. Depth of compl			
" Diam. fromft. toft. Gage	Formation: Describe color, texture, grain size			
	and show thickness and nature of each stratu with at least one entry for each change of forma			
PERFORATIONS: Perforated? Yes No.	position of Static Water Level and indicate prin	cipal wa	ter-bearin	g strata.
Type of perforator used	MATERIAL	From	то	swL
Size of perforations in. by in.	Continued			
perforations from ft. to ft.		75. ,	100	
perforations from ft. to ft.	Clay groy & brown & conel	191	193	
perforations fromft. toft.	Coarse blown sand	193	145	
(7) SCREENS: Well screen installed? Yes No	plagrovel - medaravel	195	2//	
Manufacturer's Name	Coolse brown sand	112		
Type Model No	medalavel-negalovel	2//	2/3	
Diam. Slot size Set from ft. to ft.	Coarse brown sand			
Diam Slot size Set from ft. to ft.	peagravel - mad same	2/3	219	
(8) WELL TESTS: Drawdown is amount water level is	Coarse block sand	n 101	230	<u>,</u>
lowered below static level	craystone gray	217	230	
Was a pump test made? Yes No If yes, by whom?	DECEIVED			
gal./min. with ft. drawdown after hrs.	NEULIVED			
	050 00 2011			
	SEF ZZ ZOII			
Bailer test gal./min. with ft. drawdown after hrs.	WATER RESOURCES DEPT			
Artesian flow g.p.m.	QALEM DREGON	<u> </u>	لسيسا	
Depth artesian flow encountered ft.	Work started ALEM, DREGON 77 Complete	ed S	-4	1977
(9) CONSTRUCTION:	Date well drilling machine moved off of well	_5-	-4_	19 77
Well seal-Material used	Drilling Machine Operator's Certification:			
Well sealed from land surface toft.	This well was constructed under my Materials used and information reported			
Diameter of well bore to bottom of seal in.	best knowledge and belief.			
Diameter of well bore below seal in.	[Signed] (Drilling Machine Operator)	Date .	5-4	., 19 <i>.7.7.</i>
Number of sacks of cement used in well seal	Drilling Machine Operator's License No.	9.	24	
How was cement grout placed?			/	
	Water Well Contractor's Certification:			
	This well was drilled under my jurisd		nd this r	eport is
Was a drive shoe used? ☐ Yes ☐ No Plugs Size: location ft.	true to the best of my knowledge and bel			
Did any strata contain unusable water? Yes No	(Person, first of Coldonation RD. N.V	/. (T:	pe or pri	at)
Type of water? depth of strata	Address SALEM, OR 97304			
Method of sealing strata off	[Signed] and the Bea	-1	4	
Was well gravel packed? [] Yes [] No Size of gravel:	(Water Well Contr	actor)	·19	
Gravel placed from ft. to ft.	Contractor's License No. 619 Date	5-5		., 1925

(USE ADDITIONAL SHEETS IF NECESSARY)