

Application for Water Right Transfer

Part 1 of 4 – Minimum Requirements Checklist



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

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

Check all items included with this application. (N/A = Not Applicable)

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Completed Transfer Application – Applicant Information and Signature.
- 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:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- Fees – Amount enclosed: \$ 1900.
 See the Department's Fee Schedule at www.wrd.state.or.us 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.
- 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.
- 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)

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OVER THE COUNTER**

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Additional signature(s) required
<input type="checkbox"/> Part _____ is incomplete	
Other/Explanation _____	
Staff: _____ 503-986-0 _____	Date: ____/____/____

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Part 2 of 4 - Transfer Application Map Checklist

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

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- 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.
- Permanent quality printed with dark ink on white or clear paper or film.
- The size of the map can be 8½ x 11 inches, 8½ x 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.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 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 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- N/A** 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.
- 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.
- 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.
- 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°32'15.5") or degrees-decimal with five or more digits after the decimal (example - 42.53764°).

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Part 3 of 4 – Applicant Information and Signature

Applicant Information

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APPLICANT/BUSINESS NAME STEVEN V. & CONSTANCE A. JOHNSON		PHONE NO. 503 779 1604	ADDRESS SALEM, OREGON 503 781 3170
ADDRESS 10404 HAZELGREEN RD. N.E.			FAX NO. 503 779 1667
CITY SILVERTON	STATE OR	ZIP 97381	E-MAIL steve.j@vipsinc.net

Agent Information – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.
CITY	STATE	ZIP	E-MAIL

If an agent is listed above, please check one of the following:

- Please send all correspondence to Agent. Send copies of correspondence to Applicant; **OR**
- Please send all correspondence to Applicant. Send copies of correspondence to Agent.
- Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No

If NO, include signatures of all landowners (and mailing address if different than the applicant's) or attach affidavits of consent (and mailing addresses) from all landowners or individuals/entities to which the water right(s) has been conveyed.

Permanent Transfers Only (check one box)

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I affirm that the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.



I (we) affirm that the information contained in this application is true and accurate.

Steven V. Johnson
Applicant signature

STEVEN V. JOHNSON
Name (and title if applicable) (print)

9-20-11
Date

Constance A. Johnson
Applicant signature

CONSTANCE A. JOHNSON
Name (and title if applicable) (print)

9-20-11
Date

In your own words tell us what change(s) you want made and the reason for the change(s): We wish to transfer 20.0 acres from Water Right Certif 86681(35.5A.) from the Picketsweet Property to the Ditchen Property. for irrigation of crops

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Check the following boxes that apply:

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- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- 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 landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. (To learn about sale agreements please visit our web site at: <http://www1.wrd.state.or.us/pdfs/Transfer-PropertyTransactions.pdf>)

RECEIVING LANDOWNER NAME Robert A & Bonnie J. Ditchen, Trustees		PHONE NO. 503 873 6084	ADDITIONAL CONTACT NO. 503 881 7602
ADDRESS 9712 NUSON RD. NE.		FAX NO. 503 873 0437	
CITY SILVERTON	STATE OR	ZIP 97381	E-MAIL bgditchen@aol.com

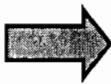
Describe any special ownership circumstances here: _____

- Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

- Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME MARION COUNTY, OR	ADDRESS 5155 SILVERTON RD	
CITY SALEM	STATE OR	ZIP 97305

ENTITY NAME	ADDRESS	
CITY	STATE	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										Proposed Changes (see "CODES" from previous page)	Proposed ("to" lands) AFTER THE CHANGES									
Twp	Rng	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)	Priority Date		Twp	Rng	Sec	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	9.7	Irrigation	Well #2	6/24/92	POU/POA	7 S	2 W	3	SE NW	900	47	20.0	Irrigation	Well (To Area #1)	6/24/92
7 S	2 W	29	NW SW	201	77	10.3	Irrigation	Well #2	6/24/92	POU/POA										
TOTAL ACRES						20.0	TOTAL ACRES						20.0							

Additional remarks: _____

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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 # 8'6681

Description of Water Delivery System

System capacity: _____ cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

Refer to Water Right Certificate # 82388 Claim of Beneficial Use.

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines and sprinklers used to divert, convey and apply the water at the authorized place of use. _____

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-____)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
WELL #2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 17259	7 S	2 W	29	NW SW	77	1450 FEET NORTH AND 1620 FEET WEST FROM THE MOST NORTHERLY CORNER, DLC 75
WELL (TO AREA #1)	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 6511	7 S	2 W	3	SE NW	47	20 FEET SOUTH AND 20 FEET EAST FROM THE NW CORNER OF THE SE 1/4 NW 1/4, SECTION 3
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed							

Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):

- Place of Use (POU)
- Character of Use (USE)
- Point of Diversion (POD)
- Additional Point of Diversion (APOD)
- Surface Water POD to Ground Water POA (SW/GW)
- Supplemental Use to Primary Use (S to P)
- Point of Appropriation/Well (POA)
- Additional Point of Appropriation (APOA)
- Substitution (SUB)
- Government Action POD (GOV)

Will all of the proposed changes affect the entire water right?

Yes Complete only the Proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.

No Complete all of Table 2 to describe the portion of the water right to be changed.

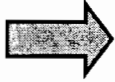
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For Place of Use or Character of Use Changes

Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands? Yes No

If YES, list the certificate, water use permit, or ground water registration numbers: _____



Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # _____;
Surface water primary Certificate # _____

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # _____

For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (Tip: You may search for well logs on the Department's web page at: http://apps2.wrd.state.or.us/apps/gw/well_log/Default.aspx)

OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide adequate information is likely to delay the processing of your transfer application. For proposed wells, we recommend that you consult a licensed well driller, geologist, or certified water right examiner for the proper information needed to complete the table.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-___	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

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#16

STATE OF OREGON
WATER WELL REPORT
(as required by ORS 537.765)

MARI 17259

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"FROM"

7S/2W/29bc

(START CARD) # 17628

(1) OWNER: Well Number: MAY 17 1981
Name United Foods Inc
Address 255 Cordon Rd.
City Salem State OR. SALEM

LOCATION OF WELL by legal description:
County Marion Latitude _____ Longitude _____
Township DEPT-5 N or S. Range 2 W E or W. W
Section 29 SW 1/4 NW 1/4

(2) TYPE OF WORK:
 New Well Deepen Recondition Abandon

Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 255 Cordon R
Salem Oregon

(3) DRILL METHOD
 Rotary Air Rotary Mud Cable
 Other _____

(10) STATIC WATER LEVEL:
14 ft. below land surface. Date 4/29
Artesian pressure _____ lb. per square inch. Date _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(11) WATER BEARING ZONES:
Depth at which water was first found 48'

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 180 ft.
Explosives used Yes No Type _____ Amount _____

From	To	Estimated Flow Rate
<u>54</u>	<u>140</u>	<u>100 +</u>

HOLE			SEAL			Amount
Diameter	From	To	Material	From	To	sacks or pounds
<u>14</u>	<u>0</u>	<u>33</u>	<u>Cement</u>	<u>0</u>	<u>33</u>	<u>34 +</u>
						<u>bentonite</u>
<u>10</u>	<u>33</u>	<u>180</u>				

(12) WELL LOG: Ground elevation _____

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 _____

Material	From	To
<u>Soil with rock Fill</u>	<u>0</u>	<u>1.5</u>
<u>Soil</u>	<u>1.5</u>	<u>3</u>
<u>Brown Sandy clay</u>	<u>3</u>	<u>12</u>
<u>Green Sandy clay</u>	<u>12</u>	<u>24</u>
<u>Gray clay</u>	<u>24</u>	<u>31</u>
<u>Gray clay & gravel</u>	<u>31</u>	<u>48</u>
<u>large gravel with brown clay</u>	<u>48</u>	<u>54</u>
<u>Gravel + brown & gray clay</u>	<u>54</u>	<u>66</u>
<u>Brown clay</u>	<u>66</u>	<u>70</u>
<u>Gravel & clay</u>	<u>70</u>	<u>80</u>
<u>loose gravel & clay</u>	<u>80</u>	<u>82</u>
<u>Clay & gravel brown & tight</u>	<u>82</u>	<u>108</u>
<u>Sand & gravel brown clay</u>	<u>108</u>	<u>114</u>
<u>looser Sand & gravel but</u>		
<u>still brown clay</u>	<u>114</u>	<u>130</u>
<u>Sand & gravel - tight</u>	<u>130</u>	<u>140</u>
<u>Red clay & gravel</u>	<u>140</u>	<u>155</u>
<u>Clay & decomposed rocks</u>	<u>155</u>	<u>160</u>
<u>Weathered rocks</u>	<u>160</u>	<u>180</u>

(6) CASING/LINER:
Casing: Diameter 10 From 1/2" To 180 Gauge .250 Steel Plastic Welded Threaded
Liner: _____

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:
 Perforations Method Mills Knife
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>110</u>	<u>140</u>	<u>3/8x1/4</u>	<u>708</u>			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailer Air Artesian
Yield gal/min 98 Drawdown 17 Drill stem at _____ Time 1 hr.

Date started 3-20-91 Completed 4-29-91

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, alteration, abandonment of this well is in compliance with Oregon well const standards. Materials used and information reported above are true to my knowledge and belief.

Signed _____ WWC Number _____ Date _____

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported at work performed during this time is in compliance with Oregon construction standards. This report is true to the best of my knowledge and belief.
Signed Floyd Sisco WWC Number 12 Date 4/30/19

Temperature of water 57 Depth Artesian Flow Found _____
Was a water analysis done? Yes No By whom _____
Did any strata contain water not suitable for intended use? Yes No
 Salty Muddy Odor Colored Other _____
Depth of strata _____

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the
STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

MIRI 654
WATER WELL REPORT
STATE OF OREGON
(Please type or print)
STATE ENGINEER
SALEM, OREGON
AUG 20 1974
State Well No. 75/ZW-3bd
State Permit No. _____

(1) OWNER:

Name Reuben Ditchen
Address Rt 2 Silverton, Oreg.

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 13.

(3) TYPE OF WELL:

Rotary Driven
Cable Jetted
Dug Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
10" Diam. from 1 ft. to 201 ft. Gage 250
" Diam. from _____ ft. to _____ ft. Gage _____
" Diam. from _____ ft. to _____ ft. Gage _____

PERFORATIONS:

Perforated? Yes No.
Type of perforator used Mills Knife
Size of perforations 3/8 in. by 3 in.
135 perforations from 183 ft. to 168 ft.
180 perforations from 153 ft. to 133 ft.
_____ perforations from _____ ft. to _____ ft.

(7) SCREENS:

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

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
Yield: gal./min. with ft. drawdown after hrs.
400 gal./min. with 120 ft. drawdown after 3 hrs.
Air Baller test
Artesian flow g.p.m.
Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used Bentonite & Puddled Clay
Well sealed from land surface to 20 ft.
Diameter of well bore to bottom of seal 14 in.
Diameter of well bore below seal 10 in.
Number of sacks of cement used in well seal _____ sacks
Number of sacks of bentonite used in well seal 1 sacks
Brand name of bentonite National
Number of pounds of bentonite per 100 gallons of water 100 lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: _____
Gravel placed from _____ ft. to _____ ft.

(10) LOCATION OF WELL:

County Marion Driller's well number _____
S.E. 1/4 N.W. 1/4 Section 3 T.7.S. R.2W W.M.
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 37 ft.
Static level 45 ft. below land surface. Date 6/11/74
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing none
Depth drilled 205 ft. Depth of completed well 205 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 and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Top soil brn.	0	3	
Clay brn sandy	3	20	
blue	20	47	
brn.	47	59	
brn sticky	59	69	
Fine sand silty brn.	69	72	
Fine gravel, sandy brn W.B.	72	75	
Med gravel loose blue W.B.	75	88	
Course sand & fine gravel blue	88	101	W.B.
Med sand & gravel Blue W.B.	101	128	
Med conglomerate	128	158	W.B.
Fine gravel & sand W.B.	158	163	
Med Conglom.	163	185	
Fine sand brn. W.B.	185	192	
Fine gravel unconsolidated	192	195	
Med conglom. brn.	195	205	

Work started 5/28/74 19 Completed 6/11/74 19
Date well drilling machine moved off of well 6/11/74 19

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] R. Richardson Date 7/3/74, 1974
(Drilling Machine Operator)
Drilling Machine Operator's License No. 738

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 R. Stadeli & Sons Inc. (Type or print)
Address Silverton, Oreg.
[Signed] Paul R. Stadeli (Water Well Contractor)
Contractor's License No. 296 Date 7/3/74, 1974

11298

WELL - AREA #1