



State of Oregon
 Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900

Application for Groundwater Registration Modification

Part 1 of 5 – Minimum Requirements Checklist

This Groundwater Registration Modification 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.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Completed Applicant Information and Signature.
- Part 4 – Completed Groundwater Registration Modification Application – Groundwater Registration Information. (Only one Groundwater registration per application, unless the Groundwater registrations to be modified are layered).
- Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- Groundwater registration modification fees – Amount enclosed: \$ **1,250.00**. (\$875.00 for a place of use change only; \$1,250.00 for any other change or combination).
- Attachments:**
- N/A Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is **not** the registration certificate holder of record. The Request for Assignment Form is available at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>.
 Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) **or** the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. 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 Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

(For Staff Use Only)

WE 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	___ Assignment Form and fee not enclosed/insufficient
___ Additional signature(s) required	___ Part ___ is incomplete

Other/Explanation _____

Staff: _____ 503-986-0 _____ Date: ____/____/____

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Part 2 of 4 – Groundwater Registration Modification Map Checklist

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

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is 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 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.
- Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes hachuring, 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 registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.
- N/A If you are proposing a modification in place of use, show the proposed place of use with hachuring including 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 appropriation with distance and bearing or coordinates from a recognized survey corner.
- N/A If you are proposing a modification in point(s) of appropriation, 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 – 42.537649)

Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME TSW Nursery Sales Inc. c/o Todd Williams		PHONE NO. (503) 849-3153	ADDITIONAL CONTACT NO. 503-678-4401
ADDRESS PO Box 1217			FAX NO. 503-678-4422
CITY Wilsonville	STATE OR	ZIP 97070-1217	E-MAIL todd@tswnurseriesales.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

AGENT/BUSINESS NAME Doann Hamilton/Pacific Hydro-Geology, Inc.		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946 (cell)
ADDRESS 18487 S. Valley Vista Road			FAX NO. (503) 632-5983
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this modification; and why:
The objectives are to move a portion of this Groundwater Registration to adjacent property to the north; change the point of appropriation for the portion being moved; and also change the point of appropriation for part of the remaining place of use that is not being moved

If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

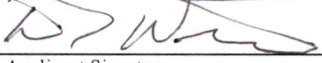
(Check one box)

- By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a); **OR**
- I (we) 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 (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

I understand that prior to Department approval of the groundwater registration modification, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the groundwater registration is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following paper: Canby Herald.

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



	<u>Todd Williams, owner</u>	<u>2/28/19</u>
Applicant Signature	Print Name and title if applicable	Date
Applicant Signature	Print Name and title if applicable	Date

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located? Yes No *If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has been conveyed.*

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Check the appropriate box, if applicable:

- Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

- Check here if water for the Groundwater registration is supplied under a water service agreement or other contract with a federal agency or other entity.

ENTITY NAME NA	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 Planning Division	ADDRESS 5155 Silvertown Road NE	
CITY Salem	STATE Oregon	ZIP 97305

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 4 of 4 – Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

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

(Note: If the POA name is not specified in the registration, assign it a name or number here.)

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	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)
Authorized Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 432	4	S	1	W	11	NE	NW	TL 500	1,260 feet south and 125 feet west from the N ¼ corner, Section 11.
Russell Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 9946	4	S	1	W	11	NE	NW	TL 500	1,230 feet south and 450 feet west from the N ¼ corner Section 11.
TSW Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 414	4	S	1	W	11	NE	NW	TL 200	960 feet south and 205 feet west from the N ¼ corner Section 11.
TSW Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NA	4	S	1	W	11	NE	NW	TL 200	755 feet south and 745 feet west from the N ¼ corner Section 11.

Check all type(s) of modifications(s) proposed below (modification “CODES” are provided in parentheses):

- | | |
|--|---|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Point of Appropriation (well) (POA) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |

Will all of the proposed changes affect the entire Groundwater registration?

- 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 registration to be changed.

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Please use and attach additional pages of Table 2 as needed.
See page 5 for instructions.

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer

Table 2. Description of Modifications to Registration GR-2053 (Certificate # GR-1979)

List only the part of the registration that will be modified. For the acreage in each 1/4 1/4, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	Rng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	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	POA(s) to be used (from Table 1)	Priority Date				
4	S	1	W	11	NE	NW	500	NA	6.0	IR	Authorized Well	9-5-1946	POU, POA	4	S	1	W	11	NE	NW	200,	NA	6.0	IR	Proposed TSW Wells 1 & 2	9-5-1946
4	S	1	W	11	NE	NW	500	NA	5.0	IR	Authorized Well	9-5-1946	POA	4	S	1	W	11	NE	NW	500	NA	5.0	IR	Proposed Russel Well	9-5-1946
4	S	1	W	11	SE	NW	500, 100	NA	8.9	IR	Authorized Well	9-5-1946	POA	4	S	1	W	11	SE	NW	500, 100	NA	8.9	IR	Proposed Russel Well	9-5-1946
TOTAL ACRES							19.9	TOTAL ACRES							19.9											

Additional remarks: None.

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Groundwater Registration # GR-2053 (Certificate # GR-1979)

For a modification in place of use or character of use:

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

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:

Pursuant to OAR 690-382-0200, any “layered” water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the “to” lands must be filed separately with a Groundwater registration modification.

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

Well log(s) are attached for each well 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://apps.wrd.state.or.us/apps/gw/well_log/)

AND/OR

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide “a best estimate” for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

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 modification application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

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
Authorized Well	Yes	MARI 432	See Well Log MARI 432							100 gpm
Proposed Well	Yes	MARI 9946	See Well Log MARI 9946							97 gpm
Proposed Well 1	Yes	MARI 414	See Well Log MARI 414							50 gpm
Proposed Well 2	No	NA	150 feet	6 inch	150	25	TBD	NA	Alluvium	100 gpm

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**Application for Water Right
Transfer
Consent by Deeded Landowner**



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

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State of Oregon)
)ss
County of Marion)

I Loy Russell in my capacity as owner,

mailing address 22241 Boones Ferry Rd NE, Aurora, OR 97002,

telephone number 503-678-2536 duly sworn depose and say that I

consent to the proposed change(s) to Water Right Certificate Number GR-2053

described in a Transfer Application (T-NA) submitted by TSW Sales Nursery Inc.,
(transfer number, if known)

on the property in tax lot number(s) 500, Section 11, Township 4S, Range 1W, W.M., located at
22241 Boones Ferry Rd NE, Aurora, OR 97002.
(site address)

Loy Russell
Signature of Affiant

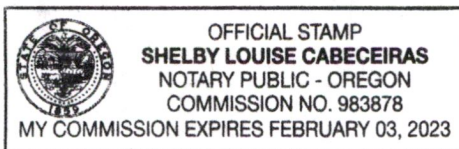
2-28-19
Date

Signature of Affiant

Date

Subscribed and Sworn to before me this 28 day of February, 2019.

Shelby Louise Cabeceiras
Notary Public for Oregon



My commission expires 2023.

WATER WELL REPORT
STATE OF OREGON

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APR 2 1982

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State Well No. _____

WATER RESOURCES DEPT
SALEM, OREGON

State Permit No. _____
WATER RESOURCES DEPT
SALEM, OREGON

#3 Rotary Air?

MARI 414

(1) OWNER:

Name Arnold Donnelly
Address 22291 Boones Ferry Rd. N.E.,
City Aurora State Ore. 97002

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air Driven
Rotary Mud Dug
 Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other
Thermal: Withdrawal Reinjection

(5) CASING INSTALLED:

Steel Plastic
Threaded Welded
6" Diam. from +1 ft. to 126 ft. Gauge .250
" Diam. from ft. to ft. Gauge

LINER INSTALLED:

" Diam. from ft. to ft. Gauge

(6) PERFORATIONS:

Perforated? Yes No

Type of perforator used _____
Size of perforations in. by in.
perforations from ft. to ft.
perforations from ft. to 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?
gal./min. with ft. drawdown after hrs.
Air test 15 gal./min. with drill stem at 115 ft. 1 hrs.
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Special standards: Yes No

Well seal—Material used Cement grout with 5% bentonite
Well sealed from land surface to 25 ft.
Diameter of well bore to bottom of seal 10 in.
Diameter of well bore below seal 6 in.
Number of sacks of cement used in well seal 35 sacks
How was cement grout placed? pressure grouted

Was pump installed? No _____ Type _____ HP _____ Depth _____ ft.
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 _____
N.W. 1/4 N.E. 1/4 Section 11 T. 15 S. R. 1 W. W.M.
Tax Lot # _____ Lot _____ Blk _____ Subdivision _____
Address at well location: 22291 Boones Ferry Rd. N.E.
Aurora, Oregon 97002

(11) WATER LEVEL: Completed well.

Depth at which water was first found 52 ft.
Static level 56 ft. below land surface. Date 2/6/82
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing 6"

Depth drilled 126 ft. Depth of completed well 126 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	0	1	
Brown sand clay	1	13	
Blue clay	13	52	
Brown sand	52	56	
Blue clay	56	63	
Black sand	63	66	
Clay	66	89	
Sand	89	120	
Gravel sand water	120	126	56

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Work started Feb. 1 1982 Completed Feb. 6 1982
Date well drilling machine moved off of well Feb. 6 1982

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] David Donnelly Date 2-6, 1982
(Drilling Machine Operator)

Drilling Machine Operator's License No. 883

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 Donnelly Well Drilling Co.
(Person, firm or corporation) (Type or print)

Address P.O. Box 5, Aurora, Oregon 97002

[Signed] David Donnelly
(Water Well Contractor)

Contractor's License No. 806 Date Feb. 19, 1982

NOTICE TO WATER WELL CONTRACTOR
The original 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.

SP*12658-690

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STATE ENGINEER
Salem, Oregon

MAR 11 432

Well Record

STATE WELL NO. 4/1W - 1162
MARTIN COUNTY
APPLICATION NO. GR-2053

OWNER: Ward C. Russell
MAILING ADDRESS: RR 2 Box 106

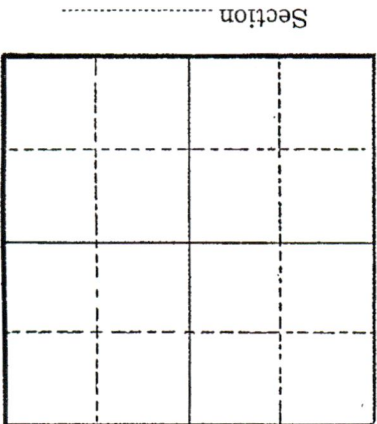
CITY AND STATE: Aurora, Oregon

LOCATION OF WELL: Owner's No. NE 1/4 NW 1/4 Sec. 11 T. 4 S. R. 1 W. W.M.

Bearing and distance from section or subdivision corner 1260' S. & 125' W.

Altitude at well

TYPE OF WELL: Drilled Date Constructed 1946
Depth drilled 123
Depth cased 123



CASING RECORD:

6-inch

FINISH:

AQUIFERS:

Sand and gravel

WATER LEVEL:

60-feet

PUMPING EQUIPMENT: Type Cook Turbine
Capacity 100 G.P.M.
HP. 3

WELL TESTS:

Drawdown ft. after hours Pumping 60 G.P.M.
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation
Temp. °F. 19

SOURCE OF INFORMATION GR-1979
DRILLER or DIGGER J. T. Miller, Aurora, Oregon

ADDITIONAL DATA: Log Water Level Measurements
Chemical Analysis Aquifer Test

REMARKS:

Sand & Gravel

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

MARI 9946

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SEP 26 1990

MARI 9946

45/1W/11 ba

(START CARD) # 18457

(1) OWNER:

Name Loy Russell
Address 22241 Boones Ferry Rd. NE
City Aurora State OR Zip 97002

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation Thermal Injection Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 132 1/2 ft.
Explosives used Type Amount

Table with columns: HOLE Diameter, SEAL Material, Amount sacks or pounds

How was seal placed: Method A B C D E Other Granular bentonite OAR 690-210-340

Backfill placed from ft. to ft. Material
Gravel placed from 85' ft. to 132 1/2' ft. Size of gravel 3/8-1/4

(6) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded

Final location of sheets 110'

(7) PERFORATIONS/SCREENS:

Perforations Method Screens Type Material stainless

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner

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

Table with columns: Pump/Bailer/Air/Flowing Artesian, Yield gal/min, Drawdown, Drill stem at, Time

Temperature of water 54 degrees Depth Artesian Flow Found
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:

(9) LOCATION OF WELL by legal description:

County Marion Latitude Longitude
Township 4S N or S, Range 1W E or W, WM.
Section 11 NE 1/4 NW 1/4
Tax Lot 00500 Lot Block Subdivision
Street Address of Well (or nearest address) 22241 Boones Ferry Rd NE Aurora, OR 97002

(10) STATIC WATER LEVEL:

89 ft. below land surface. Date 9/4/90
Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Table with columns: From, To, Estimated Flow Rate, SWL

(12) WELL LOG:

Table with columns: Material, From, To, SWL

Date started 7/6/90 Completed 9/4/90

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.

WWC Number Signed 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 above. all work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief.

WWC Number 783 Signed Date 9/21/90