Application for

Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist



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

www.oregon.gov/OWRD

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

	Check	all items included with this application. (N/A = Not Applicable)	DEC 0 2 2024
\leq		Part 1 – Completed Minimum Requirements Checklist.	
		Part 2 – Completed Application Map Checklist.	OWRD
\boxtimes		Part 3 – Application Fee, payable by check to the Oregon Water Resources completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd fee calculator.	Department, and
		Part 4 – Completed Applicant Information and Signature.	
\leq		Part 5 – Information about Permits to be Amended: Number of permits to List the Permits here: <u>Permit G-18903</u> Please include a separate Part 5 for each permit. (See instructions on page	_
\leq		Completed Permit Amendment Application Map (Does not have to be prep Water Right Examiner).	pared by a Certified
	⊠ N/A	Request for Assignment Form and statutory fee. The request for assignment completed if the applicant is not the permit holder of record and needs to permit; or the landowner of the proposed place of use is not the permit holder of the permit (the Request for Assignment Form is available). Assignment is applicant is the permit holder of record.	be assigned to the older of record and vailable online at
	⊠ N/A	Affidavit(s) of Consent are required from all permit holder(s) of record if the to the applicant or other permit holders of record that are not listed as applicant or other permit holders.	
	□ N/A	Oregon Water Resources Department's Land Use Information Form with a (or signed land use form receipt stub) from each local land use authority in diverted, conveyed, and/or used. Not required if water is to be diverted, conly on federal lands or if all of the following apply: a) a change in place of structural changes, c) the use of water is for irrigation only, and d) the use irrigation district or an exclusive farm use zone.	n which water is to be onveyed, and/or used use only, b) no
\boxtimes	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(point(s) of appropriation.	s)) or additional
	N/A	Geologist Report for a change from a surface water point of diversion to a appropriation (well), if the proposed well is more than 500 feet from the summer than 1000 feet upstream or downstream from the point of diversion	urface water source and
		(For Staff Use Only)	
		WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomple Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete	rte
		Other/Explanation	

Your permit amendment application <u>will be returned</u> 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 <u>not</u> have to be prepared received Certified Water Right Examiner. Check all boxes that apply.

	_	DEC 0.2 2027
	⊠ N/A	If more than three permits are involved, separate maps for each permit.
\times		Permanent quality printed with dark ink on good quality paper.
\boxtimes		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
\boxtimes		A north arrow, a legend, and scale.
\boxtimes		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 preapproved by the Department.
\boxtimes		Township, Range, Section, $\frac{1}{4}$, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
\boxtimes		Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
\boxtimes		Existing place of use that includes separate hachuring for each water use permit, 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 permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
	⊠ N/A	If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, 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.
\boxtimes		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 use permit.
\boxtimes	□ 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°).

	FEE WORKSHEET for PERMIT AMENDMENT		
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,360
	Types of change proposed:		
	☐ Place of Use ☐ Point of Diversion/Appropriation ☐ DEC 0 2 2024		
	Number of above boxes checked = 1 (2a)		
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0		
2	Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » »	2	\$0
	Number of permits included in Permit Amendment <u>1 (3a)</u>		
	Subtract 1 from the number in 3a: 0 (3b) If only one permit this will be 0		4-
3	Multiply line 3b by \$610 and enter » » » » » » » » » » » » » » » » » » »	3	\$0
	Do you propose to add or change a well, or change from a surface water POD to a well?		
	No: enter 0 Yes: enter \$480 for the 1 st well to be added or changed \$480 (4a)		
	Do you propose to add or change additional wells?		
	No: enter 0 Yes: multiply the number of additional wells by \$410(4b)		
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » »	4	\$480
	Do you propose to change the place of use?		
	No: enter 0 on line 5		
	Yes: enter the cfs for the portions of the permits to be amended (see below*):(5a)		
	Subtract 1.0 from the number in 5a above: (5b)		
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » »		
	If 5b is greater than 0, round up to the nearest whole number:(5c) and multiply 5c		
5	by \$350, then enter on line 5 » » » » » » » » » » » » » » » » » »	5	\$0
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$1,840
	Is this permit amendment:		
	necessary to complete a project funded by the Oregon Watershed Enhancement Board		
	(OWEB) under ORS 541.932? endorsed in writing by ODFW as a change that will result in a net benefit to fish and		
	wildlife habitat?		
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7		
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » »	7	\$0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » Permit Amendment Fee:	8	\$1,840

- *Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:
- 1. For irrigation calculate cfs for each permit involved as follows:
 - a. Divide total authorized cfs by total acres in the permit (for S-12345, 1.25 cfs \div 100 ac); then multiply by the number of acres to be changed to get the application cfs (x 45 ac= 0.56 cfs).
 - b. If the water right permit does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of permits on all the land included in the application; however **do not count** cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land. The fee should be assessed only once for each "on the ground" acre included in the application. (In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Paul and Susan Fobert			PHONE NO. (971) 275-6170	ADDITIONAL CONTACT NO.
ADDRESS	-			FAX NO.
18899 Fobert Road NE				
CITY	STATE	ZIP	E-MAIL	
Hubbard	OR	97032		
By providing an e-mail address	S, CONSEN	IT IS GIVEN TO RE	CEIVE ALL CORRESPONDENCE	FROM THE DEPARTMENT
ELECTRONICALLY. COPIES OF THE	FINAL ORD	ER 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			PHONE NO.	ADDITIONAL CONTACT NO.
Doann Hamilton			(503) 632-5016	(503) 349-6946 (Cell)
ADDRESS				FAX NO.
18487 S. Valley Vista Road	l			(503) 632-5983
CITY	STATE	ZIP	CITY	
Mulino	OR	97042	Mulino	

Explain in your own words what you propose to accomplish with this permit amendment; and why:

We prepared an additional groundwater Application-19338 using Well G. We realized having Well G on

Permit G-18538 would conflict with our new arrangement and removed Well G from Permit G-18538 under permit amendment T-13915 issuing the new Permit G-18903. We have decided we now wish to add Well A to this Permit G-18903

1	f 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)	

Is the applicant the permit holder of record? 🖂 Yes 🗌 No

If NO, include either:

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

DEC 0 2 2024

If YES, this application will not be accepted by the Department.

If NO, what are the completion dates of the permit(s)? April 9, 2026

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- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing of this Permit Amendment Application if the completion date of the permit expires within 6 months of the date of filing this application.

By my signature below, I confirm that I understand:

Prior to Department approval of the permit amendment, 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 permit 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 newspaper: Woodburn Independent.

Occul Tobert Applicant Signature	Print Name (and Title if applicable)	11-7-24 Date
Applicant Signature	Susan K fobus Print Name (and Title if applicable)	11/7/24 Date
Check <u>one</u> of the following:		
The applicant is responsi continue to be sent to the	ible for completion of change(s). In applicant.	Notices and correspondence s
	record will be responsible for com Copies of notices and correspond	
holder(s) of record.		
Check the appropriate box, if ap	ermits proposed for amendment a	re or will be located within o
Check the appropriate box, if ap Check here if any of the pe by an irrigation or other was	ermits proposed for amendment a	re or will be located within o
Check the appropriate box, if ap Check here if any of the pe by an irrigation or other was	ermits proposed for amendment a ater district.	ere or will be located within o
Check the appropriate box, if ap Check here if any of the per by an irrigation or other was IRRIGATION DISTRICT NAME NA CITY Check here if water for any	ermits proposed for amendment a ater district. ADDRESS	zip water service agreement or o
Check the appropriate box, if ap Check here if any of the per by an irrigation or other was IRRIGATION DISTRICT NAME NA CITY Check here if water for any	ermits proposed for amendment a ater district. ADDRESS STATE y of the permits supplied under a	zip water service agreement or o

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	ADDRESS	
Marion County Planning Division	5155 Silverton Road	NE
CITY	STATE	ZIP
Salem	Oregon	97305

Received

DEC 0 2 2024

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Please use a separate Part 5 for each permit being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

Received

PERMIT # G-18538

DEC 0 2 2024

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA) (Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

POD/POA Name or Number	by the	D/POA Authorized permit or is it roposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L)	Tv	wp	R	ng	Sec	<i>y</i> ₄ <i>y</i> ₄		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well A	☐ Autho		MARI 774	4	S	1	w	26	NE	SE	DLC 60	20.5 chains south and 6.75 chains east from the NE corner, DLC 63.
Well H	Autho		NA	4	S	1	w	26	SE	SE	DLC 60	2,825 feet south and 1,270 feet east from the NE corner, DLC 63
Check	k all type	(s) of change(s	s) proposed	belo	w (cl	hang	ge "C	ODES'	are p	rovide	ed in pa	rentheses):
	Place	of Use (POU)] P	oint o	f Appr	opriat	ion/We	II (POA)
	Point	of Diversion (POD)			\boxtimes] A	dditio	nal Po	int of	Approp	riation (APOA)
	Addit	tional Point of	Diversion (A	POD)		_	urface SW/G\		r POD	to Grou	und Water POA
Will a	all of the	proposed chai	nges affect t	he e	ntire	wa	ter u	se per	mit?			
D	Yes	Complete only					•				the ne	xt page. Use the
	No	Complete all	of Table 2 to	desc	ribe	the	port	ion of	the pe	ermit t	o be ch	anged.
For a chan	ge in plac	ce of use: - NA										
Does the p		lder of record	own or cont	rol t	he la	and ⁻	TO w	hich t	he pla	ce of	use is b	eing moved?
as a pern	nit holde											gned to the permit nd the required
Is the prop	osed pla	ce of use conti	iguous to the	e aut	thori	zed	place	e of us	e? 🗌	Yes [No	
The pern	nitted pla	ce of use can b	e moved on	ly to	land	ds th	at ar	e cont	iguou	s to th	e autho	orized place of use

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use unless the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

Please use and attach additional pages of Table 2 as needed. See page 6 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 Changes to Water Use Permit # G-18903

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.					Proposed				The	listir			ıld appe			nds) DSED CHANG	ES					
Twp	Rng	Sec	1/4 3	V4.	Tax Lot		Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Changes (see "CODES" from previous page)	Ti	wp	R	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	1 (i f	POD(s) or POA(s) to be used (from Table 1)	Priority Date
										АРОА	4	s	1	w	25	NW	sw	1500	DLC 60	12.8	Wells A and H	May 18, 2020
										APOA	4	s	1	w	26	NE	SE	1500	DLC 60	16.4	Wells A and H	May 18, 2020
																					•	
				TOT	AL ACR	ES											T	OTAL AC	RES	29.2		

Additional remarks: None.

Received DEC 0 2 2024

OWRD

Permit # G-18903

Are there	e other water rights certificates, water use permits or ground water registrations associated with
the "fron	n" or "to" lands? Yes No NA
If YES,	ist the other certificate, permit, or ground water registration numbers:
land fo	ermit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same rirrigation that are subject to transfer must either change concurrently or be cancelled. Any change ter right certificate or ground water registration must be filed separately in a water right transfer tion or ground water registration modification application, respectively.
For a cha	nge in point(s) of appropriation (well(s)) or additional point(s) of appropriation:
a	(ell 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 ap. (Tip : You may search for well logs on the Department's web page at: ttp://apps.wrd.state.or.us/apps/gw/well-log/Default.aspx)
AND/C	R
Σ	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 the information will delay the processing of your transfer 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 aguifer.

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
Well A	Yes	MARI 774	See Well Log MARI 774						Alluvial	Not more
Well H	No	NA	205 feet	8 inch	0 to 250	0 to 50	TBD	NA	Alluvial	than the allowed rate

Received

DEC 0 2 2024

Land Use Information Form



Applicant(s): Paul and Susan Fobert

Mailing Address: 18899 Fobert Road NE

City: <u>Hubbard</u>

Zip Code: <u>97032</u> Daytime Phone: <u>971-275-6170</u>

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

State: OR

Township	Range	Section	<i>Y</i> ₄ <i>Y</i> ₄	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:
<u>4S</u>	<u>1W</u>	26		1500	EFU	□ Diverted	□ Conveyed	☑ Used <u>I</u>	R
						Diverted	Conveyed	Used	
						Diverted	Conveyed	Used	
						Diverted	Conveyed	Used	
Marion	County	oposed U		oposed to be	diverted, conveyed, an	nd/or used or	developed:		
Permi	plication to t to Use or S d Water Use	tore Water	☐ Wate	er Resources r Right Transfe ation of Conser	r Permit	t Amendment nge of Water	or Ground Wa	ter Registratio	n Modification
Source of v	water: 🔲 F	leservoir/Po	nd 🔲 (Ground Water	Surface Water (name)	-		Received
Estimated	quantity of	water nee	ded: <u>0.16</u>	⊠ cub	oic feet per second	gallons per n	ninute 🔲	acre-feet	DEC 0 2 202
Intended u	se of wate	r: 🛛 Irriga		Commercial Quasi-Munic			estic for	household(owrd
Briefly des	cribe:								
This Lan									
11110 201	id Use Inf	ormation	Form is t	o accompa	ny a permit amend	ment appl	ication that	proposes	to
					ny a permit amend to existing water r			proposes	to

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

Revised 2/8/2010

Land Use Information Form - Page 2 of 3

WR / FS

For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below an	d provide the requested information				
Land uses to be served by the proposed water by your comprehensive plan. Cite applicable	er uses (including proposed construction) are ordinance section(s): $MCC 17.136$	e allowed outright (. 020 (A) Fac	or are not regulated • Uses		
Land uses to be served by the proposed water as listed in the table below. (Please attach do Record of Action/land-use decision and accomperiods have not ended, check "Being pursu	ocumentation of applicable land-use approvempanying findings are sufficient.) If approve	als which have alre	ady been obtained.		
Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:			
Permay	Received	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued		
	DEC 0.2 2024	Obtained Denied	☐ Being Pursued ☐ Not Being Pursued		
	DEC 02 202	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued		
	OWRD	☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued		
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued		
Name John Speckman	Til	Associate	Planner		
Signature: John Speckman Government Entity: Marion Con	Phone: 503-56-	4173 Date: 11	127/2024		
Note to local government representative: Pleasign the receipt, you will have 30 days from the Information Form or WRD may presume the land comprehensive plans.	Water Resources Department's notice date	to return the comp vater is compatible	leted Land Use with local		
Receipt	for Request for Land Use Informati	<u>on</u>	, , , , , , , , , , , , , , , , , , ,		
Applicant name:					
City or County:	Staff contact:				
Signature:	Phone: Date	e:			

M 431.....

WATER WELL REPORT

State Well No. 4/1W-26J(1)

File Original and
First Copy with the
STATE ENGINEER,
SALEM, OREGON

STATE OF OREGON

G1210

State Well No. 91170

(1) OWNER:		(11) WELL TESTS: Drawdown is amount to lowered below static le		l is			
Name Bill Fobert and Fran		Was a pump test made? F Yes No If yes, by whom	n? J T	Miller			
Address Route 1, Box 60, Hubba	rd, Oregon	Yield: 700 gal./min. with 110 ft. drawdow	n after	hrs.			
		" 600 " 100 "					
(9) TOCABION OF WELL.		" 400 " 85 "		***			
(2) LOCATION OF WELL:		Bailer test gal./min. with ft. drawdow	n after	hrs.			
	ımber, if any—	Artesian flow g.p.m. Date					
- PP	. <u>A</u> R.]_W W.M.	Temperature of water Was a chemical analysis m	ade? 🗆 Y	es 🗆 No			
Bearing and distance from section or subdivisi	the state of the s						
The well ar lener source is		(12) WELL LOG: Diameter of well					
South and 74.96 chs. East f		Depth drilled 140 ft. Depth of completed w					
of W. Vandewacker D. L. C.	63	Formation: Describe by color, character, size of materishow thickness of aquifers and the kind and nature of stratum penetrated, with at least one entry for each of	il and stru the mater hange of	cture, and lal in each format i on.			
		MATERIAL	FROM	TO			
(2) TYPE OF WORK (sheets).		Surface	0	3			
(3) TYPE OF WORK (check):		yellow clay	3	33			
New Well Deepening Recor If abandonment, describe material and proced	nditioning	surface water sand	33	36			
if abandonment, describe material and proceed	THE WALL ALL ALL		36	86			
PROPOSED USE (check):	(5) TYPE OF WELL:	vellow sand and clay	86	90			
Domestic Industrial Municipal	, ,	black sand	90	102			
Irrigation Test Well Other	Cable Jetted	black sand and small gravel	102	105			
irigation of rest well Outer	Dug 🗆 Bored 🗆	clean gravel	105	114			
(6) CASING INSTALLED: Th	readed Welded	clay	114	120			
12" Diam from 0 ft. to 1	25 ft. Gage	coarse sand	120	126			
"Diam. fromft, to		blue clay	126	140			
" Diam. from tt, to		black sand and gravel	120	140			
Addition and the second	The second secon						
(7) PERFORATIONS: Pe	erforated? Yes No						
Type of perforator used							
SIZE of perforations in. by	in.	Received					
perforations from	ft. to ft.	Heceived		-			
perforations from	ft. toft.	DEC 0 2 2024		.,			
perforations from	ft. toft.	DEC 0 Z ZOZ					
perforations from	ft, toft.						
perforations from	ft, to ft.	OWRD					
(b) Deletation	installed Yes No						
Manufacturer's Name	To the state of th						
Tipo	Model No.						
Slot size Set from	ft. to ft.			1			
Slot size Set from	ft. to ft.	Work started 3-27 159. Completed 4.	-6th-	19 59			
(9) CONSTRUCTION:	and drawell	(13) PUMP:					
Was well gravel packed? Yes K No Siz		Manufacturer's Name Food Mach. & Chemical Corp.					
manufacture production of the comment of the commen	the manufacture of the state of	Type: Water Lube Turbin	н.р30				
Was a surface seal provided? ▼ Yes □ No Material used in seal— mud	To what deput	Well Dellark Statement					
Did any strata contain unusable water? DY	es No	Well Driller's Statement:					
Type of water? Depth of	The state of the s	This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.					
Method of sealing strata off	A GLAN CO. C.	J.T.Miller	-				
MADERAVIL VA BURBARING BURBARIA VAL		NAME	ype or prin	11)			
(10) WATER LEVELS:		Address Box 198, Aur ora Ore.	, po or prii	,			
Static level 37 ft. below land	d surface Date	Auuros mannananananananan Manan Mara					
Artesian pressure lbs. per squ	uare inch Date	Driller's Well number	**********	**********			
Log Accepted by: To and Tolk	7-	[Signed] Mille					
[Signed] Date	april 30, 1959	License No. 7 (Well Driller) 4-61	h-	, 19.59			