#### **BENT 2544**

| ORIGINAL WATER WELL DRII   | LERS REPORT   Do Not State Well No. 11/4w-5 P(1)  |
|--|---|
| Duplicate with the OBSERVATION WELL STATE OF O SALEM, OREGON   | REGON BENT FILL IN State Permit No.   |
| (1) OWNER: Name State To Gregory   | (10) WELL TESTS: States ingineers   |
| Address Corrallis  | Was a pump test made? Yes \( \subseteq \text{No If yes, by whom?} \)  |
| Address CV / A /// 3   | Yield: 140 gal./min. with 6 ft. draw down after 3 hrs.  |
|  | <u>" 200 " 10 " 3 "</u>   |
| (2) LOCATION OF WELL: Hays Jub # 2   | 73 " 3 " Artesian flow g.p.m.   |
| County Jenfon Owner's number, if any   | Shut-in pressure lbs, per square inch.  |
| R. F. D. or Street No.   | Bailer test g.p.m. with ft. drawdown  |
| Bearing and distance from section or subdivision corner  | Temperature of water — Was a chemical analysis made?   Yes No   |
|  | Was electric log made of well? ☐ Yes ₩ 100  |
|  | (11) WELL LOG:  |
| (9) TYPE OF WORK (-1 - 1)  | Diameter of well,inches.  |
| (3) TYPE OF WORK (check):  New well  | Total depth ft. Depth of completed well ft.   |
| New well Deepening Reconditioning Abandon abandon abandonment, describe material and procedure in Item 11. | Formation: Describe by color, character, size of material and structure, and show thickness of aguifers and the kind and nature of the material in each |
|  | stratum penetrated, with at least one entry for each change of formation.   |
|  | ft. to ft.  |
| Cable  | 20 30 X011 + Ch39   |
| Irrigation Test Well   Other   Dug Well  | Ju : 20 sandy Chay  |
| (6) CASING INSTALLED: If gravel packed   | " " Bland Lille Sayel   |
| Threaded  Welded   | ph" la ! " Parker of Saud + Chara   |
| Gage or Diameter from to   | 41" 78 " Borone Place   |
| FROM ft. to ft. Diam. Wall of Bore ft. ft.   | 78" 85 - " C/27 grand More Wa   |
| <del></del>  | 85-103" Browd Clay  |
| n n n n n n n  | 103 ? "BLKE Eldy  |
| <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>   | , , , ,   |
| 11 11 11 11 11 11  | " "   |
| Type and size of shoe or well ring Size of gravel:   | " "   |
| Describe joint   | " "   |
| (7) PERFORATIONS:  | 0 0   |
| Type of perforator used  | "   |
| SIZE of perforations in., length, by in.   | " DEGETVEIL   |
| FROM ft. to ft. perf per foot No. of rows  | " IN GER 10 1957  |
| 1001 " 6 " " " " " " " " " " " " " " " " "   | " HE DES TO   |
| 5.1 " 5.5" " " " " " " " " " " " " " " " "   | " STATE ENGINEER  |
| <del>3.7. 3.4</del>  | " SALEM, OREGON   |
| SCREENS:   | 19 19   |
| Give Manufacturer's Name, Model No. and Size   | " "   |
|  | n n   |
| (8) CONSTRUCTION:  | n n   |
| Was a surface sanitary seal provided? ☐ Yes ☐ No To what depth ft.   | n n   |
| Were any strata sealed against pollution? ☐ Yes ☐ No   | Ground elevation at well site feet above mean sea level.  |
| If yes, note depth of strata FROM ft. to ft.   | Work started Dec 15 1956 Completed Jan 7 1957   |
| 11. 10. 11. 15. 15. 15. 15. 15. 15. 15. 15. 15   | Well Driller's Statement:   |
|  | This well was drilled under my jurisdiction and this report is  |
| METHOD OF SEALING  | true to the best of my knowledge and belief.  |
| (9) WATER LEVELS:  | NAME Hamilton Drilling Co.  |
| Depth at which water was first found  ft.  | (Person, firm, or corporation) (Typed or printed)   |
| Standing level before perforating ft.  | Address 83823   |
| Standing level after perforating ft.   | Driller's well number   |
| Log Accepted by:   | [Signed] But Hamilt   |
| [Signed] Dated   | (Well Driller)  |
| Owner  | License No. 2 Dated   |



# Application for Well ID Number

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Do not complete if the well already has a Well Identification Number.

JUN 19 2017

| I. <u>OWNER INFORMATION</u>   |   | WATER RES  | SOURCES DE                            |
|---|---|--|---------------------------------------|
| Current Owner Name (please print): Oregon Sta   | ate Board of Higher Ed (Oregon Stat   | te University) SALEM   | I, OREGON                             |
| Mailing Address: 3455 NE Granger Avenue   | ·   |  | · · · · · · · · · · · · · · · · · · · |
| City, State, Zip: Corvallis, OR 97330   |   |  |                                       |
| Mail Well ID Tag to: SAME AS ABOVE  | In Care Of (C/O)  |  |                                       |
| Name & Address: L125195   |   |  |                                       |
| City, State, Zip:   |   |  |                                       |
|   | •   |  |                                       |
| II. WELL LOCATION INFORMATION (Please   | se fill out as completely as possible)  |  |                                       |
| Township: 11S (North / South) Range: 4  |   | 1/4 of the   | 1/4                                   |
| Tax Lot (usually last 3-5 numbers of Tax Map #):  | 100 County  | D4   | 1/4                                   |
| GPS Coordinates: Latitude 44.636140745  |   |  | _                                     |
| Street Address of Well, City: 3455 NE Grange  | r Avenue, Corvallis, OR 97330   |  | · ·                                   |
| l l   |   |  |                                       |
| If the property had a different street address in the  III. GENERAL WELL INFORMATION (Pleas   | se fill out as completely as possible, AND a  |  | vailable)                             |
| III. <u>GENERAL WELL INFORMATION</u> (Pleas<br>Use of Well (domestic, irrigation, commercial, ind   | se fill out as completely as possible, AND a<br>ustrial, monitoring): Irrigation  | uttach copy of Well Log, if a  |                                       |
| III. GENERAL WELL INFORMATION (Please Use of Well (domestic, irrigation, commercial, ind Date Well Constructed (or property built):   | se fill out as completely as possible, AND as ustrial, monitoring): Irrigation  Total Well Depth:   | nttach copy of Well Log, if a  | Unknown                               |
| III. GENERAL WELL INFORMATION (Please Use of Well (domestic, irrigation, commercial, ind Date Well Constructed (or property built):  Owner at time the well was constructed (if known)  | se fill out as completely as possible, AND as ustrial, monitoring): Irrigation  Total Well Depth: Well Lo   | nttach copy of Well Log, if a  | Unknown                               |
| III. GENERAL WELL INFORMATION (Please Use of Well (domestic, irrigation, commercial, ind Date Well Constructed (or property built):  Owner at time the well was constructed (if known) Other Information:  West Well (Irrigation Turb   | se fill out as completely as possible, AND as ustrial, monitoring): Irrigation  Total Well Depth: Well Lowine Pump)   | ttach copy of Well Log, if a  Casing Diameter:   | Unknown                               |
| III. GENERAL WELL INFORMATION (Please Use of Well (domestic, irrigation, commercial, ind Date Well Constructed (or property built):  Owner at time the well was constructed (if known) Other Information:  West Well (Irrigation Turb SUBMITTED BY (please print):  Robert N. Tu  | se fill out as completely as possible, AND as ustrial, monitoring): Irrigation  Total Well Depth: Well Lowine Pump)   | ttach copy of Well Log, if a  Casing Diameter:   | Unknown                               |
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| III. GENERAL WELL INFORMATION (Please Use of Well (domestic, irrigation, commercial, ind Date Well Constructed (or property built):  Owner at time the well was constructed (if known) Other Information:  West Well (Irrigation Turb)  SUBMITTED BY (please print):  Robert N. Turb  PHONE:  541-766-6841  Send application to: Oregon Water Resources Depart Applications are processed in the order they are receivable. | se fill out as completely as possible, AND as ustrial, monitoring): Irrigation  Total Well Depth:  Well Lovine Pump)  rkisher (Benton County Environment EMAIL &/or FAX: 541-766-6248  ment 725 Summer St NE, Suite A, Salem, Or                    | Casing Diameter:  og # (if known):  tal Health)  regon 97301; or fax to (503) 914-5 business days.             | Unknown                               |
| III. GENERAL WELL INFORMATION (Please Use of Well (domestic, irrigation, commercial, ind Date Well Constructed (or property built):  Owner at time the well was constructed (if known) Other Information:  West Well (Irrigation Turb)  SUBMITTED BY (please print):  Robert N. Turb  PHONE:  541-766-6841  Send application to: Oregon Water Resources Depart Applications are processed in the order they are receivable. | se fill out as completely as possible, AND as ustrial, monitoring):  Total Well Depth:  Well Lovine Pump)  rkisher (Benton County Environment EMAIL &/or FAX:  ment 725 Summer St NE, Suite A, Salem, Or ved, and Well ID Numbers are mailed within | Casing Diameter:  og # (if known):  regon 97301; or fax to (503) states days.  artment:  Well Iden             | Unknown                               |

#### **BENT 2544**



## BENTON COUNTY ENVIRONMENTAL HEALTH ON-SITE SEWAGE DISPOSAL SYSTEM PLOT PLAN

Owner: Oregon State Board Higher Ed

Date: 6/5/17

SITE: PERMIT:

Applicant: N/A

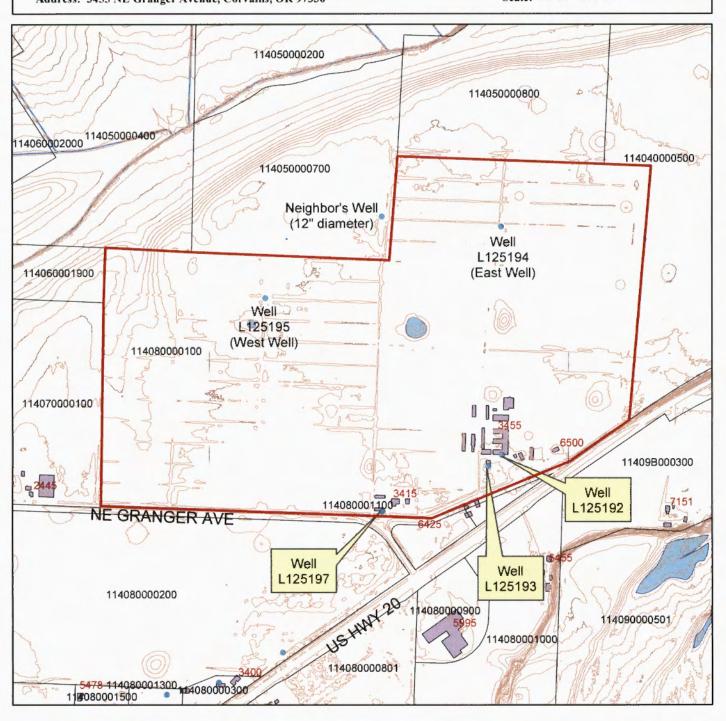
Assessor's Map and Tax Lot Numbers: 11-4-8 TL 100

Address: 3455 NE Granger Avenue, Corvallis, OR 97330

TYPE: Well Map Only

Parcel: 242.29 Acres

Scale: 1 inch = 800 feet



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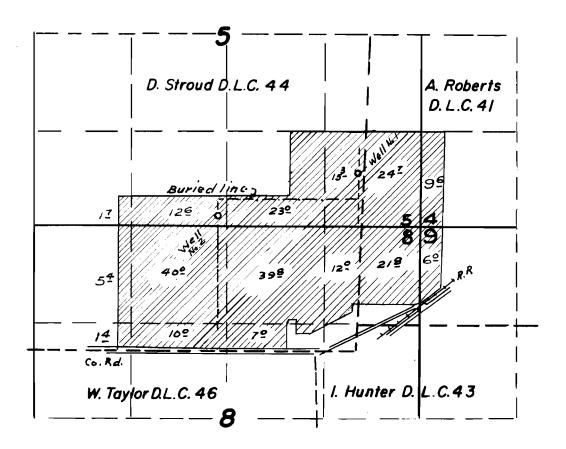
JUN 19 2017

0 400 800 1,600 Feet



WATER RESOURCES DEPT SALEM, OREGON

### T. 11 S. R. 4 W. W. M.



# FINAL PROOF SURVEY

Application No. G-822 Permit No. G-742
IN NAME OF

Oregon State University

Surveyed July 15. 1964 by Floyd L Siegmund

DFM. 5058 2-1964A