



## FOR WATER RESOURCES DEPARTMENT USE ONLY

Date Postmarked 2-18-93  
 Date Hand-delivered \_\_\_\_\_  
 Watermaster Initials \_\_\_\_\_

W- 40773  
 WRD Receipt 97292  
 Date Fee Received 2-22-93

CHECK NO. \_\_\_\_\_

## START CARD

### NOTICE OF BEGINNING OF WELL CONSTRUCTION

(as required by ORS 537.762)

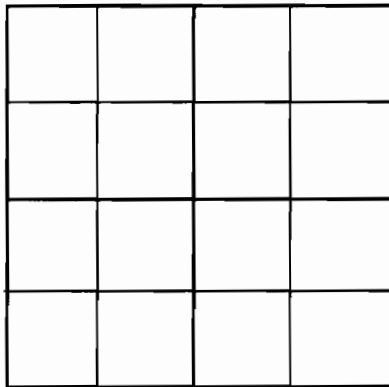
This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original mailed or delivered to the Water Resources Department, 3850 Portland Road NE, Salem, OR 97310, no later than the day construction, alteration, conversion or abandonment work begins. **A \$75 fee shall accompany all notices for new well construction or conversion of an existing hole not previously used as a water well** (make checks payable to the Water Resources Department). Notices meeting this requirement but received without the required fee will not be accepted as properly and timely filed. The Water Resources Commission has authority to impose civil penalties for failure to submit the required \$75 fee with the start card and for failure to submit cards prior to beginning any construction, alteration, conversion or abandonment work.

Owner's name and mailing address JAMES D. EDWARDS913319 CHEYENNEPRINEVILLE, OREGON 97754

Check type of work: Fee Required ☒ New construction ☐ Conversion No Fee Required ☐ Repair ☐ Deepening ☐ Recondition ☐ Abandonment

Proposed Commencement Date 2-13-93 Existing or Proposed Well Depth 440 Diameter 6"

Check Use: ☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation ☐ Monitoring  
☐ Thermal ☐ Injection ☐ Other \_\_\_\_\_

Proposed Well Location: County CROOK Owner's Well Id. No. 646Township 16 S (N or S) Range 16E (E or W) Section 23B

1. \_\_\_\_\_ 1/4 of \_\_\_\_\_ 1/4 of above section

2. Street address of 913319 Cheyenne  
well location Prineville, Oregon 977543. Tax lot number of well location 48004. Attach map with location identified.  
(See reverse of this form for approved maps)

5. Show well location within 1/4, 1/4 of section grid at left.

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks, septic drain fields and other hazards. ( See #2 on back)

Owner's signature \_\_\_\_\_

Title \_\_\_\_\_

Home phone \_\_\_\_\_

Date \_\_\_\_\_

Work phone \_\_\_\_\_

DARRELL MAPHET

Bonded Water Well Constructor

License No. 584Company MAPHET WELL DRILLING

NOTE: This is not a water right application. The owner is responsible for obtaining a water right through the Water Resources Department, if required.

THIS COPY TO WATER RESOURCES DEPARTMENT IN SALEM  
 If no fee applies, discard this copy