

WELL IDENTIFICATION FORM

Owner's Well Number: _____

CURRENT WELL OWNER:

Phone: _____

Name: Charles F. & Peggy A. O'Donnell

Mailing Address: P.O. Box 11273

City: Anchorage State: AK Zip: 99511

If a well report is available for this well, please attach a copy of it to this form and return. It is not necessary for you to complete the remainder of the form if the well report is attached. If a well report is not available, please complete the remainder of the form to the best of your ability.

WELL LOCATION: "50364 CURR"

County: Curry Latitude: _____ Longitude: _____

Township: 31 N or (S) Range: 15 E or (W) Section: 9 SW 1/4 NW 1/4

Tax Lot Number: 600

Street Address of Well (if different from above): 93141 Floras Lake Rd.
Langlois, OR 97450

WELL INFORMATION:

Start Card Number: ? Approx. Construction Date: ?

Well Constructor: ?

Name of Owner at Time of Construction: ?

Well Depth (in feet): 20'-25' +/- Static Water Level (in feet): _____

Diameter of Exposed Well Casing (in inches): 36" +/-

Does this well have a formal water right associated with it? Yes: _____ No: If yes:

Application #: _____ Permit #: _____ Certificate #: _____

Please Return Completed Form to: Oregon Water Resources Department
158 12th Street NE
Salem, OR 97310

Well Identification Number: _____ (Office use only) "29086"

RECEIVED
SEP 08 1998
WATER RESOURCES DEPT.
SALEM, OREGON