

Corrected via ID app

DESC 1219

RECEIVED

15S 10E 3 SWNW

146/10e/1da

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

MAR 19 1992

(START CARD) # W 40030

WATER RESOURCES DEP

(1) OWNER: Name Gifford + ELLEN GIBSON Address 69793 PINEGLEN City SISTERS State OR Zip 97759

Well Number SALEM, OREGON LOCATION OF WELL by legal description:

County Desch Latitude Longitude Township 14S N or S. Range 10E E or W. WM. Section 4 NE 1/4 SE 1/4 Tax Lot Lot Block Subdivision Street Address of Well (or nearest address) END OF BARNEY COURT SISTER

(2) TYPE OF WORK: [X] New Well [] Deepen [] Recondition [] Abandon

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Other

(4) PROPOSED USE: [X] Domestic [] Community [] Industrial [] Irrigation [] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 96 ft. Explosives used [] Yes [X] No Type Amount

Table with columns: HOLE Diameter, From, To, SEAL Material, From, To, Amount sacks or pounds. Includes handwritten entries for 10" and 8" diameters and Bentonite seal.

How was seal placed: Method [] A [] B [] C [] D [] E [X] Other pound down dry Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

(6) CASING/LINER: Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Includes handwritten entry for 6" casing.

Final location of shoe(s)

(7) PERFORATIONS/SCREENS: [X] Perforations Method Factory [] Screens Type Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Includes handwritten entry for 1/8" slot size.

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

Table for well tests with columns: Yield gal/min, Drawdown, Drill stem at, Time. Includes handwritten entries for 100 gal/min yield and 95' drill stem.

Temperature of Water 51° Depth Artesian Flow Found Was a water analysis done? [] Yes [] No By whom Did any strata contain water not suitable for intended use? [] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata:

(10) STATIC WATER LEVEL: 58 ft. below land surface. Date 3/14/92 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES: Depth at which water was first found 58'

Table with columns: From, To, Estimated Flow Rate, SWL. Includes handwritten entry for 58' to 96' depth with 200 gpm flow rate.

(12) WELL LOG: Ground elevation

Table for well log with columns: Material, From, To, SWL. Includes handwritten entries for SAND and med SAND + GRAVEL WB.

RECEIVED

MAY - 7 1992

WATER RESOURCES DEPT. SALEM, OREGON

Date started 3/14/92 Completed 3/14/92

(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.

Signed Stephen Ladd Helger WWC Number 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.

Signed Wayne T. Buchner WWC Number 677 Date 3-14-92



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

Application for Well ID Number

RECEIVED BY OWRD

OCT 12 2017

SALEM, OR

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

I. OWNER INFORMATION

Current Owner Name (please print): ANTHONY G. BLOK
 Mailing Address: 69015 BARCLAY CT.
 City, State, Zip: SISTERS, OR. 97759
 Mail Well ID Tag to: SAME AS ABOVE In Care Of (C/O)
 Name & Address: _____
 City, State, Zip: _____

II. WELL LOCATION INFORMATION (Please fill out as completely as possible)

Township: 15S (North / South) Range: 10E (East / West) Section: 3 SW 1/4 of the NW 1/4
 Tax Lot (usually last 3-5 numbers of Tax Map #): 302 County DESCHUTES
 GPS Coordinates: 44,298832 -121,532872 per Water Right mapping tool
 Street Address of Well, City: 69015 BARCLAY CT. SISTERS, OR.
 If the property had a different street address in the past: _____

III. GENERAL WELL INFORMATION (Please fill out as completely as possible, AND attach copy of Well Log, if available)

Use of Well (domestic, irrigation, commercial, industrial, monitoring): _____
 Date Well Constructed (or property built): 3/14/92 Total Well Depth: 96' Casing Diameter: 6"
 Owner at time the well was constructed (if known): GIFFORD GIBSON Well Log # (if known): DESC 219
 Other Information: THE ACTUAL WELL LOCATION DESCRIBED ON LOG WAS IN ERROR.
THE ATTACHED APPLICATION FOR AN ADJOINING WELL (15' APART) DRILLED
IN 4/16/96 WAS CORRECT.
 SUBMITTED BY (please print): ANTHONY G. BLOK
 PHONE: 541-788-1226 EMAIL &/or FAX: tntblok@gmail.com

Send application to: Oregon Water Resources Department 725 Summer St NE, Suite A, Salem, Oregon 97301; or fax to (503) 986-0902.
 Applications are processed in the order they are received, and Well ID Numbers are mailed within 4-5 business days.

I WAS TOLD BY BARBARA IN THE BEND WATER RESOURCES OFFICE THAT THE DOCUMENT COULD NOT BE ALTERED. NEITHER WELL HAS AN I.D. NUMBER PRESENTLY.

For Official Use Only by the Oregon Water Resources Department:

Received Date: <u>10-12-17</u>	Well Log Number: <u>DESC 1219</u>	Well Identification #: <u>L-128604</u>
-----------------------------------	--------------------------------------	---

FOR WATER RESOURCES DEPARTMENT USE ONLY

Date Postmarked _____
 Date Hand-delivered 3-19-92
 Watermaster Initials _____

W- 40030
 WRD Receipt 84543
 Date Fee Received 3-19-92

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.

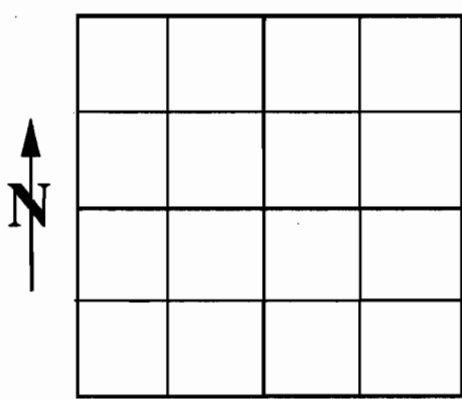
Owner's name and mailing address Gifford + ELLEN GIBSON
6979.3 PINEGLEN Rd
SISTERS, OR 97759

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

Proposed Commencement Date 3/14/92 Existing or Proposed Well Depth 100' Diameter 6"

Check Use: Domestic Community Industrial Irrigation Monitoring
 Thermal Injection Other _____

Proposed Well Location: County Deschutes Owner's Well Id. No. _____
 Township 10 S (N or S) Range 10 E (E or W) Section 24



- NE 1/4 of S.E. 1/4 of above section
- Street address of well location 69015 Barclay Ct
Sisters, OR 97759
- Tax lot number of well location _____
- Attach map with location identified.
(See reverse of this form for approved maps)
- 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

 Date

 Home phone

 Work phone

Wayne T. Buckner
 Bonded Water Well Constructor

License No. 677

Company Mid-Oregon Drilling Inc.

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