filed with the State Well No. STATE ENGINEER, SALEM, OREGON 97310 DEPT. (Please type opposite RESOURCES State Permit No. G-7466 within 30 days from the date Mo not write above this IDALEM, ORECON of well completion. (10) LOCATION OF WELL: (1) OWNER: County Deschutes 5W 345W 34 Section Bearing and distance from section or subdivision corner (2) TYPE OF WORK (check): Reconditioning | Abandon | New Well 🗷 ... Deepening 🗀 If abandonment, describe material and procedure in Item 12. (11) WATER LEVEL: Completed well. (3) TYPE OF WELL: (4) PROPOSED USE (check): Depth at which water was first found Rotary Driven [7] Static level ft. below land surface. Date Domestic | Industrial | Municipal | Cable Jetted [Irrigation Tast Well Other Dug Bored | Artesian pressure lbs. per square inch. Date CASING INSTALLED: Threaded | Welded | (12) WELL LOG: Diameter of well below casing . / Diam. from ______ft. to _____ft. Gage 225 ft. Depth of completed well Depth drilled " Diam. from ft. to ft. Gage Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata. PERFORATIONS: Perforated? | Yes | No. MATERIAL SWL Type of perforator used Size of perforations in. by **∻**∕5 perforations from _____ ft. to ____ SO perforations from _____ ft. to ____ ft. 20 perforations from ft. to (7) SCREENS: Well screen installed? Yes No Manufacturer's Name Model No. . Diam. ____ Slot size ____ Set from ____ ft. to ____ Diam. Slot size Set from ft. to ft. Drawdown is amount water level is lowered below static level (8) WELL TESTS: Was a pump test made?
Yes No If yes, by whom? gal./min. with Bailer test gal./min. with ft. drawdown after Artesian flow g.p.m. perature of water 52 Depth artesian flow encountered /Completed Work started Date well drilling machine moved off of well (9) CONSTRUCTION: Drilling Machine Operator's Certification: Well seal-Material used This well was constructed under my direct supervision. Materials used and information reported above are true to my Well sealed from land surface to best knowledge and belief.
[Signed] Diameter of well bore to bottom of seal Diameter of well bore below seal . (Drilling Machine Operator) Number of sacks of cement used in well seal Drilling Machine Operator's License No. ... Number of sacks of bentonite used in well seal Brand name of bentonite Water Well Contractor's Certification: Number of pounds of bentonite per 100 gallons This well was drilled under my jurisdiction and this report is lbs./100 gals. true to the best of my knowledge and belief. Was a drive shoe used? Yes No Plugs Size: location ft. Did any strata contain unusable water?

Yes

No Type of water? depth of strata Method of sealing strata off Was well gravel packed? ☐ Yes ☐ No Size of gravel: Contractor's License No. Gravel placed from ft. to

NOTICE TO WATER WELL CONTRACTOR

The original and first copy

of this report are to be

DESC 2099

For Official Use Only:

Received Date:

County Well Log ID#

Desc 2099

Well Identification Tag #

47358

WELL IDENTIFICATION APPLICATION FORM

CORRECTED

BUYER/CURRENT WELL OWNER:	00.0.00(2)
Name: SHERODE & SUSALI POWERS	
Mailing Address: Yo Mike Mansker, CB Reea Bros Rea	Uty. P.O. Box 219
City: State: Ol Zip: 47759 Phone	e: (541) 549 - 7117
WELL LOCATION:	
County:Owner's Well Number:	
Township: 14 Nor S Range: 17 Por W, Section: 18	1/41/4
Tax Lot Number: Type of Well: water supply	monitoring
Street Address of Well (if different from above): Weer Bridge Road, Toad, Toad	
WELL INFORMATION: (do not complete remainder of application if well log is available)	
Start Card Number: Approx. Construction Date: _	
Well Constructor:	
Name of Owner at Time of Construction:	
Well Depth (in feet): Static Water Level (in feet):	
Diameter of Exposed Well Casing (in inches):	
Does this well have a formal water right associated with it? Yes:	No:
If Yes: Application #: Permit #: Certif	
Places Paturn Completed Form to: Pager Wright	

Please Return Completed Form to:

Roger Wright

Well Identification Program

Oregon Water Resources Department

158 12th Street NE Salem, OR 97310

RECEIVED

DEC 2 0 2000