## STATE OF OREGON

RECEIVED MACE
JUNA 1986

9809C 10/85

WATER V	VELL REPOI d by ORS 537.765)	RT JUN 2 WATER RESC	1986	1440		(		
(1) OWNER Name	?: , •	Owner's Well, N	migencon DELL	(9) LOCATION OF WELL by I	egal d	escrip	tion:	, "
Address /67				Township 375 Nor S, Range	4	Longitudi US	ForW	SX/N/
City GRAN		State ORE	E Zip 97527	Section 30 NW 14			_ E OF W,	AA IAT.
(2) TYPE C	F WORK:			h.a.	_	Subd	ivision	
New Well		Recondition	Ahandon	Street Address of Well (or nearest address)		,		
(3) DRILL	METHOD:							
Rotary Air	Rotary Mud	☐ Cable ☐	Other	(10) STATIC WATER LEVEL  ft. below land surface.	•	Date	4-30	g- <b>8</b> 6
	1 12	- 1		Artesian pressurelb. per s	quare inc			<u> </u>
(4) PROPO		Industrial <b>1</b> Ir		(11) WELL LOG: Ground elevati				
Domestic 'hermal		Other	rigation	Material	From	То	WB?	SWL
<del></del>	HOLE CONST			BROWN CLAY	0	4		
,		of Completed Well	<b>//00</b> ft.					
	Specia	d Standards date of app	roval	BROWN CLAY AND				
HOLE meter From		SEAL From To	Amount eacks or pounds	DECOMPOSED GRANITE	4	17		
00	18 Material P.C.	From To	<u> </u>	DECOMPOSED		<u> </u>		
1 10	745	u	-	GRANITE HARD	17	24		
6 18	100			GEHIOTIE HING		<i>d</i> /		
				TOMOSTONE				
How was seal place	d? Method LIA	□в <b>в</b> с □ р	⊔ E	GRANITE FRACTURED	24	83		-
	n ft, to							
		ft. Size of grave	el	TOMOSTONE	NA			
(6) CASINO	***************************************			GRANITE HARD	83	100		
Diamete	r From To	Gauge Steel Plasti	c Welded Threaded					
Casing:	17 22		. 💂 🔲			-		
				AGUIFER	30	45	7	
Liner:					52	55	23	
					7 4	F-7 1		
al location of sh	noe(s)	0		RECEIVED	60	./!	15	
(7) PERFO	RATIONS/SO	CREENS:			81	83	7	
☐ Perforati			. ,	MAY 2.9 1986	01	0.5		
☐ Screens	Туре	Mate	rial					
· · · · · · · · · · · · · · · · · · ·	Slot	Tele/pipe		MSK DIGT: 16				
om To	size Number	r Diameter size	Casing Liner	San III Mak on	-			
		- a						
	-							
-			_	4-30-01		V-3/	9-8	
					pleted	r	J-0	<u></u>
(8) WELL 7	FESTS: Minir	num testing time	is 1 hour Flowing	(unbonded) Water Well Constructor Ce				
☐ Pump	☐ Bailer	Air	Artesian	I constructed this well in compliance standards. Materials used and information r	e with (	Oregon was	ell const	ruction
Yield gal/min	Pumping level	Drill stem at	Time	knowledge and belief.	-p	asovo arv	5 11 40 10 1	my best
<u>₹</u> ∧	1	72	1 hr	Signed Hike furte		Dota (	4-30	-QL
		_/3	-			_ Dan		
				(bonded) Water Well Constructor Certi				
Temperature of wa	ter_51	Depth Artesian Flo	w Found	I accept responsibility for construction with all Oregon water well standards. This	of this	well and	d its com	pliance
Was a water analys	· · · · · ·	Anthro		knowledge and belief.	100010	v. uc 11.	me nes	, or my
Did any strata con	tain water not suitab	le for intended use? 🔲 🗇	Too little	Signed Col Church	۔ ر		5-2-	QL
☐ Salty ☐ Muc	ddy 🗌 Odor 🔲 C	olored Other		DANIN	7 , n	ate		
Depth of strata:			9 × 5	Company HOUN DRILL	W4 C	o. Job No	. #	<u>چ</u>
	4.4	<b>⊸</b> −.	<del>-</del>					

## JACK 14407 WELL IDENTIFICATION APPLICATION FORM

RECEIVED

BUYER/CURRENT WELL OWNER:			or reservoir service as the Bloom English
Name: ROBFET PROLUSE			APR 1 0 1997
Name: KOBERT TROLOSE	2	WAT	ER RESOURCES DEPT
Mailing Address: 1070 Kuali	POND		SALEM, OREGON
City: GRANTS PASS State:	OR Zip: 9%	527 Phone: 64/	846-7792
WELL LOCATION: County: JACKSON	Township 370	N or \$ Range:	4 E or₩
Section: 30 NW 1/4	4 _ NW 1/4	Owner's Well Nur	mber:
Tax Lot Number: 700 Stree	et Addres of Well	(if different from above	ve):
WELL INFORMATION: (do not com Start Card Number: Well Constructor:	Approx. Constr	uction Date:	
Name of Owner at Time of Construction	:		
Well Depth (in feet):	_ Static Water Le	vel (in feet):	
Diameter of Exposed Well Casing (in inc	ches):		
Does this well have a formal water right	associated with it?	Yes: No: _	
If Yes: Application #: Pe	ermit #:	Certificate #: _	
Please Return Completed Form to:		10.007	ent
For Official Use Only:			

M:\wellid.app