

For Official Use Only by The Oregon Water Resources Department:

Received Date:

10-2-03

County Well Log ID #

JACK 34198

Well Identification Tag #

L-68427

WELL IDENTIFICATION APPLICATION FORM**RECEIVED**

OCT 02 2003

INSTRUCTIONS ARE IN THE LETTER ON THE REVERSE SIDE OF THIS APPLICATION.
FOR SHARED WELLS PLEASE SEE THE 2ND PARAGRAPH FROM THE TOP ON THE REVERSE SIDE OF THIS APPLICATION.
THE OREGON WATER RESOURCES DEPT
SALEM, OREGON**BUYER OR CURRENT LANDOWNER** (For the property that the well is located on. The Well ID tag will be sent to this address unless otherwise specified here. Tag will be mailed out in approximately 10 days)

Name: Loretta Mac Landemaine Revocable Trust

Mailing Address: P.O. Box 44

City: Gold Hill State: OR Zip: 97525 Phone: ()

WELL LOCATION:

County: JACKSON Well # 2 Irrigation (if multiple wells exist on same property-ie: well #1, #2, etc.)

Township: 35 North or South (circle one) Range: 2W East or West (circle one) Section: 32 1/4 1/4 (If known)

Tax Lot #: 1504 Type of Well: water supply? monitoring? (not the county's tax acct. #) (Ex: domestic or irrigation use) (Ex: monitoring groundwater for contaminants)

Address of Well: 9400 Hwy 234, Gold Hill, OR 97525 (Number) (Street) (City)

(Optional): Does this well have a formal water right associated with it? Yes: No: (If unknown you may want to contact the Water Rights Group at 503-378-3739 extension 201 for research)

If Yes: Application #: Permit #: Certificate #:

(Optional): Latitude Longitude (May sometimes be obtained from Well Log Report)

WELL INFORMATION: (If available, attach copy of driller's well report. If report is not available please complete as much of the following as possible. at a minimum the prior landowner names going back until around the time the well would have been drilled. Prior landowners can be obtained from the County Assessor - see instructions.)

Start Card #: Approx. Well Construction Date:

Well Constructor:

Name of Land Owner at Time of Construction (or prior landowners, going back in time to when well was constructed)

Well Depth (in feet): Static Water Level (in feet):

Diameter of Exposed Well Casing (in inches):

Please Return Completed Form to: Well ID Program @ Oregon Water Resources Department
158 12th Street NE - Salem, OR 97301-4172, or fax to 503-378-8130 (App-July03)