NOTICE TO WATER WELL CONFRACTO The original and first copy of this report are to be filed with the TER WELL REPORT 36/6W-16R NGINEER OREGON (Please type or print) State Well No. STATE ENGINEER, SALEM, OREGON within 30 days from the date of well completion. State Permit No. ... Drawdown is amount water level is lowered below static level (1) OWNER: (11) WELL TESTS: Was a pump test made? Yes \(\subseteq \) No If yes, by whom? Yield: gal./min. with ft. drawdown after hrs. (2) LOCATION OF WELL: Bailer test gal./min. with drawdown after Driller's well number Artesian flow Date 2 1/4 Section T. Temperature of water Was a chemical analysis made? ☐ Yes Bearing and distance from section or subdivision corner (12) WELL LOG: Diameter of well below casing Depth drilled Depth of completed well Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation. MATERIAL FROM (3) TYPE OF WORK (check): Well P Deepening [Reconditioning [andonment, describe material and procedure in Item 12. (4) PROPOSED USE (check): (5) TYPE OF WELL: Driven 🗌 Domestic Industrial | Municipal Rotary Jetted [Irrigation [Test Well [Other Dug Bored [CASING INSTALLED: Threaded Diam. from Gage 7) PERFORATIONS: Perforated? Yes | No of perforator used perforations from perforations from ft. to CRE machine moved off of well

perforations	from ft. to f	't.
ENS:	Well screen installed? 🗌 Yes 🖺 No	
's Name		
	Model No	
Slot size	Set from ft. to f	t. Work started
Slot size	Set from ft. to f	
TRUCTION	4	(13) PUMP:
terial used in seal		Manufacturer's
ft. Was a packer used?		Туре:
ill bore to bottom of sealin.		Water Well Co
strata cemented off? Tyes No Depth		
e used? 🖸 Yes 🗌 No		This well v
#	Yes No Size of gravel:	True to the bes
rom	ft. to ft.	- NAME
3	able water? Yes No	
?	depth of strata	_ Address .
ling strata of		Drilling Machi
er levei	LS:	
5	ft. below land surface Date	[Signed]
ure	lbs. per square inch Date	_ Contractor's Li
	(USE ADDITIONAL	SHEETS IF NECESS.

ntractor's Certification: vas drilled under my jurisdiction and this report is ine Operator's License No

H.P. .

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