NOTICE TO WATER WELL CONTRACT The original and first co FER WELL REPORT of this report are to be

State Well No. 365/6W-1 State Permit No.

Corrected via ID app

		will the	•	-	101 100	STATE	OF OREGO	N
STATE	ENGINEER,	SALEM,	official at the	EN	IGIN	- (Flease	type or print)	
	within 30 da;	ys from t	he date SALE		a here. The services			
	of mail	completic	m SALEI	va. C.	3	Doingt wr	ite above this l	line)

(1) OWNER:

ve this me)			
(10) LOCATION OF WELL:			
County OSEPHALE Driller's well no	mber		
SE 14 SE 14 Section /7 T. 365	R. 6	u	W.M.
Bearing and distance from section or subdivision	on corne	r	
<u></u>			
(11) WATER LEVEL: Completed w	ell.		
Depth at which water was first found	13	0	ft.
Static level 10 ft. below land s	urface.	Date	8-72
Artesian pressure lbs. per squar		Date	
(19) THEFT T.O.C.			,
(12) WELL LOG: Diameter of well k			·
Depth drilled 6/ ft. Depth of compl		,-,	ft.
Formation: Describe color, texture, grain size and show thickness and nature of each stratum with at least one entry for each change of format position of Static Water Level and indicate prin	n and action. Rep	quifer pe	netrated, change in
MATERIAL	From	То	swL
DECOMMISED GRANITE	0	5	
CREY CRAVEL -12" BOUNERS	5	50	10
DEDWPOSED GRANITE	50	61	10
A STATE OF THE STA		-	
			-
	<u> </u>		
Work started 6-5 1972 Complete	ed 6-	-9'	1972
Date well drilling machine moved off of well	<u>6-</u>	<u> I</u>	1972
Drilling Machine Operator's Certification: This well was constructed under my Materials used and information reported best knowledge and wellef.	direc	t super are tru	vision. e to my
[Signed] Machine Operator)	Date	10	., 19 72
Drilling Machine Operator's License No.	76	<u> </u>	
Water Well Contractor's Certification:		·	
This well was drilled under my jurisd true to the best of my knowledge and bel		nd this :	report is
Name (Person, firm or corporation)	<i>LLLL</i> T	ype or pr	رم int)
Address ZCOUNE, GDAN	75 D	955,0	DRE
[Signed]	for s		<u>.</u>

20 Date ...

Contractor's License No.



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem Oregon 97301 (503) 986-0900 www.oregon.gov/owrd

## Application for Well ID Number

**RECEIVED** 

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

JUL 16 2025

OWRD	
owner INFORMATION  Trent Owner Name (please print): Yvonne Voss-Leichty & Nancy Evelyn Alspach	
iling Address: 5791 Lower River Rd.	
y, State, Zip: Grants Pass, OR 97526	
nil Well ID to: SAME AS ABOVE In Care Of (C/O)	
me & Address:	
y, State, Zip:	
WELL LOCATION INFORMATION (Please fill out as completely as possible)	
wnship: 36 S (North / South) Range: 6 W (East / West) Section: 17 NW 1/4 of the SE 1	/4
c Lot (usually last 3-5 numbers of Tax Map #): 900 County Josephine	
5 Coordinates: 42°26'16.59"N 123°25'53.96"W	
eet Address of Well, City: 5945 Lower River Rd. Grants Pass	
he property had a different street address in the past: 5863 Lower River Rd. Grants Pass	
GENERAL WELL INFORMATION (Please fill out as completely as passible, AND attach copy of Well Report, if available)  e of Well (domestic, irrigation, commercial, industrial, monitoring):  te Well Constructed (or property built): 6-8-1972  Total Well Depth: 61'  Casing Diameter: 6 inch  where at time the well was constructed (if known): Charles R. Alspach  Well Report # (if known): JOSE 3990	
BMITTED BY (please print): Nancy E. Alspach	<del></del>
ONE: 541-660-5630 EMAIL &/or FAX: bob@fortvannoyfarms.com	
send the completed application, you may MAIL it to: Oregon Water Resources Dept. 725 Summer St NE, Suite A, Salem, Oregon 97 EMAIL the completed PDF form to: Ladeena.K.Ashley@water.oregon.gov, or FAX it to: (503) 986-0902.	301.
For Official Use Only by the Oregon Woter Resources Department:	
Received Date: Well Report Number: Well Identification 7-16-2025 JOSE 3990 L-15846	