ORIGINAL File Original and Duplicate with the STATE OF SALEM, OREGON	1 10 10
(1) OWNER: SALWARD ONE  Address STAPPIN ONE	Tests: Drawdown is amount water level is lowered below static level  Was a pump test made? ☐ Yes ☐ No If yes, by whom?  Yield: gal./min. with ft. drawdown after hrs.  """""""""""""""""""""""""""""""""""
(2) LOCATION OF WELL:  County Representation of Total State of Total  1/4 Section of Total State of Total  Bearing and distance from section or subdivision corner  5 / 0 3 3 / E 2   8 C 7 from  Much /4 Core Sec 6 T 2 7 5 P 18 E	Bailer test gal./min. with ft. drawdown after hrs.  Artesian flow g.p.m. Date  Temperature of water Was a chemical analysis made?
"YPE OF WORK (check): Well Deepening Reconditioning Abandon	stratum penetrated, with at least one entry for each change of formation.  MATERIAL FROM TO
abandonment, describe material and procedure in Item 11.  (4) PROPOSED USE (check): (5) TYPE OF WELL:  Stic   Industrial   Municipal   Rotary   Driven   Cable   Jetted   Dug   Bored   Dug   Bored   Dug   Rotary   Driven   Cable   Dug   Rotary   Driven   Driven   Cable   Dug   Rotary   Driven   Dri	
(6) CASING INSTALLED: Threaded   Welded   Welded	
Type of perforator used         in. by         in.           SIZE of perforations         in. by         in.           perforations from         ft. to         ft.           ft.         ft.         ft.           perforations from         ft. to         ft.	The substitute of the substitu
(8) SCREENS: Well screen installed	
Diam. Slot size Set from ft. to ft.  Diam. Slot size Set from ft. to ft.	Work started 19 . Completed 19
ONSTRUCTION:  all gravel packed?	(13) PUMP:  Manufacturer's Name  Western  H.P.  Well Driller's Statement:  This well was drilled under my jurisdiction and this report is
Method of sealing strata off  (10) WATER LEVELS: Static level ft. below land surface Date	true to the best of my knowledge and belief.  NAME (Person, firm, or corporation) (Type or print)  Address
Artesian pressure Ibs. per square inch Date  Log Accepted by:	Driller's well number
[Signed] Date, 19	