| ORIGINAL File Original, and Duplicate with the | |
|---|---|
| STATE ENGINEER, SALEM, OREGON 11 3 1957 STATE OF OR | Fill In State Permit No. G-217 |
| (1) OWNER: Name CLArIOETL FANNEL BCILE HAVES | (10) WELL TESTS: L/NN |
| Address ALBAKILE Oregon | Was a pump test made? I Yes No If yes, by whom? Vield: gal./min. with ft. draw down after hrs. |
| <i>T</i> 0 | " 300 gol" 4 # " 200 10 feb. |
| (2) LOÇATION OF WELL: | " " " " " " " " " |
| County Owner's number, if any— G-2/7 | Artesian flow g.p.m. Shut-in pressure 100 100 lbs. per square inch. |
| R. F. D. OFSTRUCTION. P SOX 247 | Shut-in pressure lbs. per square inch. Bailer test g.p.m. with lbs. ft. drawdown |
| Bearing and distance from section or subdivision corner | Temperature of water 60 Was a chemical analysis made? Yes |
| | Was electric log made of well? ☐ Yes ☑No |
| | (11) WELL LOG: |
| (3) TYPE OF WORK (check): | Diameter of well, inches. |
| New well Deepening Reconditioning Abandon | Total depth ft. Depth of completed well ft. |
| abandonment, describe material and procedure in Item 11. | 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 nenetrical with at least experimental contents. |
| (4) PROPOSED USE (check): (5) EQUIPMENT: | of formation. |
| Domestic Industrial Municipal Rotary | 8. Hu Min bana Han area |
| Irrigation | OMA WEVERLECUAL TO GOLF |
| CACINIC INCOMPANIES | arough my to 245. |
| Threaded □ Welded If gravel packed | |
| Gage or Diameter from to | n n |
| FROM ft. to ft. Diam, Wall of Bore ft. ft. | 7) 1) |
| " " " " BIME A. " | " |
| n n n n n | 1) 1) |
| 11 21 21 21 21 | n n |
| Type and size of shoe or well ring Stock S.M. Size of gravel: | n n |
| Describe joint | n n |
| (7) PERFORATIONS A L 1 . O OLITA | n n |
| Type of perforator used | n n |
| SIZE of perforations 4 in Contral, length, by 2, in Walan. | n n |
| FROM ft. to ft. Pperf per foot No. of rows | n n |
| " 14 To " 24 ft." " W" " | n n |
| n n n n n n | n n |
| 22 23 23 23 23 23 23 | n n |
| SCREENS: | n n |
| Give Manufacturer's Name, Model No. and Size | n n |
| 8) CONSTRUCTION: | n n |
| Was a surface sanitary seal provided? Yes No To what depth fit. | n n |
| Were any strata sealed against pollution? Yes | Ground elevation at well site feet above mean sea level. |
| If yes, note depth of strata FROM ft. to ft. | Work started 19 , Completed 19 |
| 33 33 35 35 35 35 35 35 35 35 35 35 35 3 | Well Driller's Statement: |
| METHOD OF SEALING | This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. |
| (A) TYLADID T TYTYY C | NAME BAR + FLOD WOLLDWILLING |
| Depth at which water was first found | (Person, firm, or corporation) (Typed or printed) |
| Clare III | Address 465 Wason wheel druve |
| Standing level after perforating ft. | Driller's well number |
| Log Accepted by: | [Signed] That melaum |
| [Signed] Charles Dated July 19 57 | License No. Dated Dated 19.57 |