

STATE ENGINEER
Salem, Oregon

*W.A. Kerr
16105*

MAR 16 1955
Well Record

GR- 1134

STATE WELL NO. 10/2W-18D(3)
COUNTY Marion
APPLICATION NO. GR- 1173

OWNER: E. O. Kerr

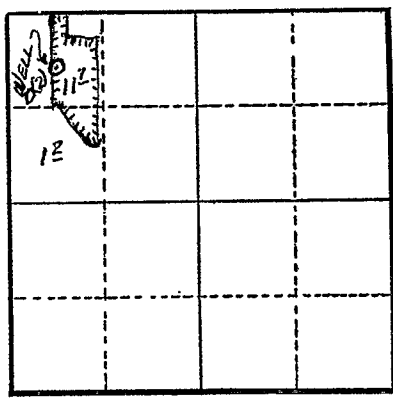
MAILING ADDRESS: _____

LOCATION OF WELL: Owner's No. _____

CITY AND STATE: Jefferson, Oregon

NW 1/4 NW 1/4 Sec. 18 T. 10 S. R. 2 W., W.M.

Bearing and distance from section or subdivision corner 760' S. & 680' E. from NW cor. Sec. 18.



Section 18

Altitude at well 245 ft.

TYPE OF WELL: Drilled Date Constructed 1952

Depth drilled 18 ft. Depth cased 18 ft.

CASING RECORD:

8 inch

FINISH:

AQUIFERS:

COARSE GRAVEL

WATER LEVEL:

6 ft. 6.70' (6-20-58) Ppg. -

PUMPING EQUIPMENT: Type 3 x 4 in. Cent. H.P. 15
Capacity 300 G.P.M.

WELL TESTS:

Drawdown 1 ft. after _____ hours 300 G.P.M.
Drawdown _____ ft. after _____ hours _____ G.P.M.

USE OF WATER Irrigation Temp. _____ °F. _____, 19

SOURCE OF INFORMATION G. R. Record

DRILLER or DIGGER Marion West

ADDITIONAL DATA:

Log _____ Water Level Measurements Chemical Analysis _____ Aquifer Test _____

REMARKS:

Log: Soil 0 to 5 ft.
Sand & gravel 5 to 12 ft.
Large gravel 12 to 18 ft.

Irrigation of 12.9 acres.

For Official Use Only:

Received Date: _____ County Well Log ID # Mari 16105 Well Identification Tag # 57565

57565

8-57565

WELL IDENTIFICATION APPLICATION FORM

BUYER/CURRENT WELL OWNER:

Name: Lisa V. Harrell
 Mailing Address: 3580 SE Jefferson Dr.
 City: Jefferson State: OR Zip: 97352 Phone: (541) 327-7783

NOTE: Well Identification Tag will be sent to the above address unless otherwise specified.

WELL LOCATION:

Latitude S 89 Longitude E 30

County: Marion Owner's Well Number (1st or 2nd, etc) _____
 Township: 10 N or S Range: 2 E or W Section 18 1/4 _____ 3/4 _____

12/7
13/18

Tax Lot Number: 600 Type of Well: water supply irrigation monitoring _____

Address of Well (if different from above): _____

Does this well have a formal water right associated with it? Yes: _____ No: NO

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

WELL INFORMATION: (do not complete remainder of application if well log is attached)

Start Card Number: _____ Approx. Construction Date: 1965

Well Constructor: Joe Vausic

Name of Land Owner at Time of Construction: _____

Well Depth (in feet): 20' Static Water Level (in feet): 10'

Diameter of Exposed Well Casing (in inches): 8"

Please Return Completed Form to: Well Identification Program
 Oregon Water Resources Department
 158 12th Street NE
 Salem, OR 97301-4172

RECEIVED
 MAR 29 2002
 WATER RESOURCES DEPT.
 SALEM, OREGON

Kaurie helped customer in finding correct log for this app.