

STATE ENGINEER
Salem, Oregon

1896
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MARI 1896
Well Record

STATE WELL NO. 5/LW-194(2)
COUNTY Marion
APPLICATION NO. GR-1124

GR-1084

OWNER: James L. Bright

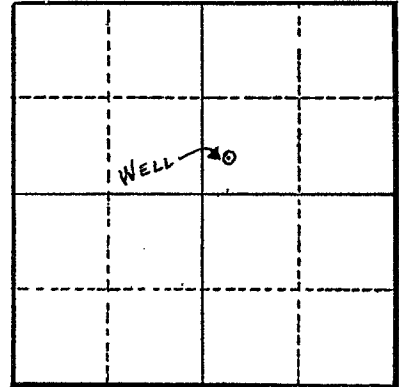
MAILING ADDRESS: 1010 S. Pacific Hwy.

LOCATION OF WELL: Owner's No.

CITY AND STATE: Woodburn, Oregon

SW 1/4 NE 1/4 Sec. 19 T. 5 S., R. 1 W., W.M.

Bearing and distance from section or subdivision corner 350' E. & 490' N. from Center of Sec. 19.



Section 19

Altitude at well 180 ft.

TYPE OF WELL: Drilled Date Constructed 1949

Depth drilled 126 ft. Depth cased 126 ft.

CASING RECORD:

6 inch

FINISH:

AQUIFERS:

WATER LEVEL:

32 ft.

PUMPING EQUIPMENT: Type Jacuzzi Jet H.P. 2

Capacity 30 G.P.M.

WELL TESTS:

Drawdown ft. after hours 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 Wymore

ADDITIONAL DATA:

Log N.A. Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

Irrigation of 2 acres.

For Official Use Only:

Received Date: _____

County Well Log ID # _____

Well Identification Tag #

41225

WELL IDENTIFICATION APPLICATION FORM

BUYER/CURRENT WELL OWNER:

Name: C/o Evelyn Moreland (Agent)

Mailing Address: 3340 Commercial St. SE

City: Salem State: OR Zip: 97302 Phone: 503 303-2460

WELL LOCATION:

MARI 1896

County: Masore Owner's Well Number: _____

Township: _____ N or S, Range: _____ E or W, Section: _____ 1/4 _____ 1/4

Tax Lot Number: 16630093 Type of Well: water supply _____ monitoring _____

Street Address of Well (if different from above): 1050 S. Pacific Hwy. Woodburn
or 1044

WELL INFORMATION; (do not complete remainder of application if well log is available)

Start Card Number: _____ Approx. Construction Date: _____

Well Constructor: _____

Name of Owner at Time of Construction: _____

Well Depth (in feet): _____ Static Water Level (in feet): _____

Diameter of Exposed Well Casing (in inches): _____

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

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

Please Return Completed Form to:

Lisa Juul Roggenbight
Well Identification Program
Oregon Water Resources Department
158 12th Street NE
Salem, OR 97310

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