



MARI 9347  
For Official Use Only:

Received Date: \_\_\_\_\_

County Well Log ID #

Well Identification Tag #

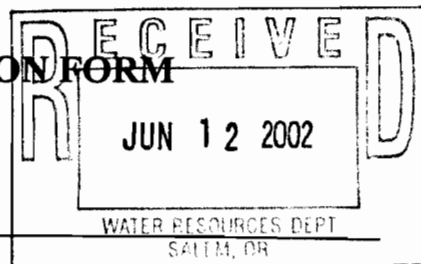
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WELL IDENTIFICATION APPLICATION FORM



BUYER/CURRENT WELL OWNER:

George Hybertson Clo Realtor  
Name: Ken Caster Broker

Mailing Address: 307 E Mar

City: S. Twista State: OR Zip: 97381 Phone: (503) 873-3000

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

WELL LOCATION:

SEE Attached Well Logs

County: Marion Owner's Well Number (1<sup>st</sup> or 2<sup>nd</sup> well on property, etc) New & Deepening 2nd

Township: 6 N or S, Range: 1 E or W, Section: 34, 1/4 1/4

Tax Lot Number: (circled) Type of Well: water supply  monitoring

Address of Well (if different from above): 18827 N. Abigina Rd.  
(Number) (Street) (City)

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

If Yes: Application #: \_\_\_\_\_ Permit #: \_\_\_\_\_ Certificate #: \_\_\_\_\_

(Optional): Latitude \_\_\_\_\_ Longitude \_\_\_\_\_ (May sometimes be obtained from Well Log Report)

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

See "Dear Landowner" letter for instructions in completing this portion of the application, or contact the Well Identification Program at (503) 378-8455, extension 260.

Start Card Number: \_\_\_\_\_ Approx. Well Construction Date: \_\_\_\_\_

Well Constructor: \_\_\_\_\_

RECEIVED  
OVER THE COUNTER

Name of Land Owner at Time of Construction: \_\_\_\_\_

Well Depth (in feet): \_\_\_\_\_ Static Water Level (in feet): \_\_\_\_\_

Diameter of Exposed Well Casing (in inches): \_\_\_\_\_

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