

RECEIVED

UMAT 4719
WELL IDENTIFICATION FORM

FEB 9 1998

WATER RESOURCES DEPT.
SALEM, OREGON

CURRENT WELL OWNER:

Owner's Well Number: _____

Name: Robert J. Wondra

Mailing Address: 53797 Hwy 332

City: MILTON-FREEWATER State: OR. Zip: 97862

If a well report is available for this well, please attach a copy of it to this form and return. It is not necessary for you to complete the remainder of the form if the well report is attached. If a well report is not available, please complete the remainder of the form to the best of your ability.

WELL LOCATION:

County: Umat. Latitude: _____ Longitude: _____

Township: 6 N or S, Range: 35 E or W Section: 27 SE 1/4 SW 1/4

Tax Lot Number: _____

Street Address of Well (if different from above): _____

WELL INFORMATION:

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: **Oregon Water Resources Department
158 12th Street NE
Salem, OR 97310**

(Office use only)

Well Identification Number: 23294