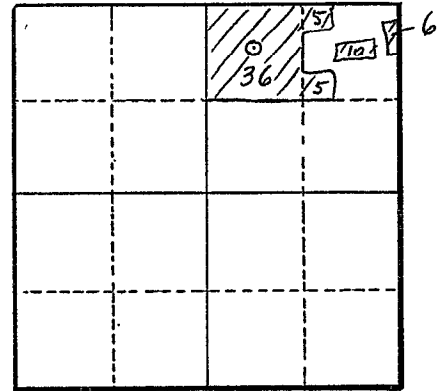# STATE ENGINEER
Salem, Oregon

Well Record

STATE WELL NO. _5/3W-22 B(1)_
COUNTY _Yamhill_
APPLICATION NO. _GR-210_

OWNER: _Dick Rockhill_   MAILING ADDRESS: _Rt 1, Box 103_

LOCATION OF WELL: Owner's No. _#1_   CITY AND STATE: _Dayton, Oregon_

_NW_ ¼ _NE_ ¼ Sec. _22_ T. _5_ ~~N~~ S., R. _3_ ~~N~~ W., W.M.

Bearing and distance from section or subdivision corner _2000 feet west and 630 feet south from_
NE corner of section 22.

Altitude at well _+100 feet Interpolated_

TYPE OF WELL: _Drilled_ Date Constructed _1939_

Depth drilled _30_   Depth cased _30_

Section _22_

CASING RECORD:

_8 ____ inch steel casing from 0 to 30 feet._

FINISH:

perforated between 20 & 30 feet.

AQUIFERS:

sand & gravel from 12 to 30 feet.

WATER LEVEL:

15 feet below land surface. Aug. '56

PUMPING EQUIPMENT: Type _centrifugal_   H.P. _20_
Capacity _400_ G.P.M.

WELL TESTS:

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

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

USE OF WATER _Irrigation 62 acres_   Temp. _____ °F. _____, 19____

SOURCE OF INFORMATION _Registration statement GR-210_

DRILLER or DIGGER _- Huffman Bros. Newberg, Oregon_

ADDITIONAL DATA:

Log _____ Water Level Measurements _____ Chemical Analysis _____ Aquifer Test _____

REMARKS:
soil 0 to 12'
sand 12 - 26
gravel 26 to 30

WELL IDENTIFICATION FORM

CURRENT WELL OWNER: Owner's Well Number: _____

Name: _Roger & Gayle Holderby_   868-7701

Mailing Address: _21841 Grand Island Loop_

City: _Dayton_   State: _OR_   Zip: _97114_

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: _Yamhill_ 6581   Latitude: _____   Longitude: _____

Township: _5_ N or S, Range: _3_ E or W Section: _22_ _____ 1/4 _____ 1/4

Tax Lot Number: _00100_

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

WELL INFORMATION:

Start Card Number: _____   Approx. Construction Date: _1946_

Well Constructor: _____

Name of Owner at Time of Construction: _Lula A. Rockhill & C.A. Rockhill_

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: _____ LP 6904