NOTICE TO WATER WELL CONTRACTOR The original and first copy of this repty are to be filed with the

WATER RESOURCES DEPARTMEN SALEM, OREGON 97310 within 30 days from the date of well completion.

TYPE OF WORK (check):

Deepening [

If abandonment, describe material and procedure in Item 12.

" Diam. from ft. to

perforations from

Diam. Slot size Set from ft. to

gal./min. with

gal./min. with

perforations from ..

perforations from

Reconditioning [

(4) PROPOSED USE (check):

Irrigation Test Well Other

Perforated? Yes

Drawdown is amount water level is lowered below static level

ft. drawdown after

Depth artesian flow encountered

Well screen installed?

Yes

(1) OWNER:

New Well

Rotary

Cable

Dug

(3) TYPE OF WELL:

70 " Diam. from 0 ..." Diam, from

PERFORATIONS:

Type of perforator used

(7) SCREENS:

Bailer test

Artesian flow

Manufacturer's Name

WELL TESTS:

perature of water

(9) CONSTRUCTION:

Diam. Slot size Set from ...

Driven 📑

CASING INSTALLED:

Jetted

Bored

(Please type	e or print)			
Do not write a	bove this line? RESOURCES DEPTermit N	To		
	SALEM. ORECON			
	(10) LOCATION OF WELL:			
new	County Jan full Driller's well number 504			
	14 14 Section 27 T.55	- 2/11		
	Bearing and distance from section or subdivisi			
	B and about to it section of subdivisi	on corner		
ditioning 🗌 Abandon 🖂		-		
edure in Item 12.	(11) WATER LEVEL: Completed w	11		
POSED USE (check):		en.		
Industrial Municipal	Depth at which water was first found	ft.		
Test Well Other		surface. Date 3 -6.1		
	Artesian pressure lbs. per squar	e inch. Date		
hreaded Welded	(12) WELL LOG: Diameter of well h			
49 ft. Gage 250	Diameter of well b	// 4		
ft. Gage				
ft. Gage	Formation: Describe color, texture, grain size a and show thickness and nature of each strature.	m and aquifor popotrotod		
eforested 0 5737 57 37	with at least one entry for each change of format position of Static Water Level and indicate prin	ion. Report each change in		
forated? Yes No.		cipal water-bearing strata.		
6	MATERIAL	From To SWL		
in.	the sort	0 2		
ft. toft.	report of	2 /		
ft. to ft.	rough clay	1/ 2/3		
ft. toft.	earne + graves	25 47		
alled? 🗆 Yes 📈 No				

Model No				
ft. to ft.				
ft. to ft.				
is amount water level is				
ow static level	J			
es, by whom? Wwllor				
t. drawdown after hrs.				
	·-			
" "				
ft. drawdown after hrs.				
low encountered ft.	Work started 5-28 1977 Completes	. 6 7 7 77		
	- Complete	15-26 19//		
-	Date well drilling machine moved off of well	5-26 19/		

Well seal-Material used 4: Well sealed from land surface Diameter of well bore to bottom of seal Diameter of well bore below seal Number of sacks of cement used in well seal

g.p.m.

test made? Yes \(\simega \) No If yes, by whom?

Was a drive shoe used? Yes 🗍 No Plugs Size location Did any strata contain unusable water? 🗌 Yes 📝 No

ft. to ...

Type of water? Method of sealing strata off

Gravel placed from

How was cement grout placed?

Was well gravel packed? [Yes No

Size of gravel:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name Blue Water by

(Drilling Machine Operator)

Drilling Machine Operator's Certification:

Drilling Machine Operator's License No.

Water Well Contractor's Certification:

best knowledge and belief.

This well was constructed under my direct supervision. Materials used and information reported above are true to my

ddress	01 Box 75	Daulon	ONE
Signedl	Robertes	halleen	-6

(Water Well Contractor) Contractor's License No. Date ...

WELL IDENTIFICATION FORM

CURRENT WELL OWNER:		Owner's Well N	lumber: # 3_	Irrigation
Name: VERL HOLDEN & FLOR	ENCE HARDESTY	USER * ID:	27567	
Mailing Address: 10374 Hazel				
City: Silverton	State: O1	regon Zip: _	97381	
If a well report is available for this we not necessary for you to complete the well report is not available, please comp	s <i>lete the remainac</i> t	at the form to th	ie desi uj youi	r womey.
WELL LOCATION: SEE ATACH	ED SHEETS	anh 6739	").	NOV 1 8 199
County:	Latitude:	Long	itude:	WATER RESOURCES SALEM, OREGO!
Township: N or S, Range:				
Tax Lot Number:				· · · · · · · · · · · · · · · · · · ·
Street Address of Well (if different from	n above):			
WELL INFORMATION: Start Card Number: Well Constructor:	Approx. Const	ruction Date:		·
Name of Owner at Time of Construction Well Depth (in feet):				
Diameter of Exposed Well Casing (in in	nches):			
Does this well have a formal water righ	t associated with it?	Yes: No	If yes	s: t
Application #:	Permit #:	Certific	ate #:	
Please Return Completed Form to:	Oregon Wat 158 12th Str Salem, OR 9		partment	
4	(Office use only)		-	
33/all Identification Number	36677			•