Fee\$ 21 00

County Clerk

## STATE OF OREGON WELL OWNERSHIP INFORMATION FORM (FILE WITH COUNTY CLERK'S OFFICE)

Pursuant to ORS 537.788, owners of property on which a well is located shall, within 60 days following the construction and/or alteration of a new well or upon property transfer, record the following information in the property deed records at the appropriate County Clerks Office. Either the deed recording number or legal description of the property may be used to identify the property.

Property Owner Na	me(s): B.	+ Jolynn	Ives	Parameter and the second secon			
Mailing Address:	11548	Burlwood	Dr.			v.	
Deed Recording Nu	mber (or legal	description): $\int$	-23 R	10 5.36B	TL 9200	Lot 6 Bix	2 Sun Fonst Est,
Well Identification I	Number(s): L	19999					
resource.  2. All wells shall be s 3. All wells shall be s 4. Well casing must b 5. Wells may only be	artment. Most uses effit of a water right. Int on a specific properties on a single properties of properties of a conditional properties of equipped with an action permanently abandate in accordance with a condition about water	of water require a water Contact the Department perty. In which a well is located ition where they are not prevent any foreign success port or airline so amage and meet mining oned by a licensed and in state rules.	er right issued nt for more inf ed are responsi- t a threat to pul- bstance from that static wat- num extension bonded well of abandoning yo	by the Water Resour formation. The Wate fible for maintaining to blic health or safety, a entering the well, er level information of requirements, constructor or a landour well, or wish to reco	ces Department. Her Resources Depart hat well in a proper a source of contamir can be determined a wner with a valid precive a copy of the a	owever, state law ment cannot guara manner. Some battation, or a waste out any time.  ermit and bond. Wadministrative rules	allows some uses ntee the presence asic requirements of the groundwater well abandonment seconcerning well
I have read the above	describing my	basic rights and	responsibi	lities related to	well ownershi	p <b>.</b>	
Signature of all Prop	perty Owners:	13-/-					
	· -	Jolyn	wlu	n_			***
Signed or attested bef	fore me this	19th	day c	of Decem	nber	, 200	0,
by Ben + J	Olyna I (Name(s	s) of Person(s))	St	ate of Oregon,	County of	leschute	
Panar &	of h		]	My Commission	n Expires:	-28-20	01
(Notary - Please Place Seal He		OFFICIAL S SANDRA L STEP NOTARY PUBLIC COMMISSION NO MISSION EXPIRES AF	HENSON -OREGON D. 300618				
			rding Office	Use Only roperty Owner(s)	•••••••••••••••••••••••••••••••••••••••	•••••	
					State of Orego Recorded 04/20 In Vol. M01 Pa Linda Smith,	)/01, at <u>2:/2</u> <i>F</i>	