

Return To: Mikael Shields
81633 Walton Rd.
Creswell, OR 97426

M05-68885

Klamath County, Oregon

11/14/2005 08:26:08 AM

Pages 1 Fee: \$21.00

**STATE OF OREGON WELL 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 of a new well or alteration of an existing 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 Name(s): Mikael Shields & Sara A. Shields

Mailing Address: 81633 Walton Rd. Creswell OR 97426

Deed Recording Number (or legal description): Vol M04 Pg 68707-08

Well Identification Number(s): 1.80065

Limited Rights and Obligations: Most uses of water in Oregon require a water right permit issued by the Oregon Water Resources Department. However, some uses of ground water are exempt from permitting requirements under Oregon Revised Statutes 537.545.

Whether or not a use of ground water is exempt from permitting requirements, a landowner is responsible for maintaining any well on the landowner's property in proper condition so that a well does not pose a health threat or health hazard, and does not contaminate or serve as a source of waste of the ground water resource by allowing loss of artesian pressure or commingling of aquifers.

Wells may be permanently abandoned by licensed and bonded well constructors or a bonded and permitted landowner.

Additional obligations of a landowner with regard to well maintenance and abandonment of wells can be found at Oregon Revised Statutes 537.747 to 537.795 and Oregon Administrative Rules Chapter 690, Division 200 to 240.

Signature of Property Owner(s): Mikael Shields
Sara A. Shields

State of Oregon, County of Grant

This instrument was acknowledged before me on October 21, 2005 by _____

(name of person(s) as _____ type of authority - if applicable) of _____
(name of party on behalf of whom instrument was executed - if applicable)

Before Me: _____ Seal, if any:

Notary Public for State of Oregon, County of Grant
My commission expires 8/1/08



Recording Office Use Only

214