

STATE OF OREGON DEPARTMENT OF GEOLOGY AND MINERAL INDUSTRIES
ASSAY LABORATORIES

REQUEST FOR SAMPLE INFORMATION

The State law governing free analysis of samples sent to State Assay Laboratories requires that certain information be furnished the Laboratory regarding samples sent for assay or identification. A copy of the law will be found on the back of this blank. Please fill in the information called for as completely as possible, and submit it along with your sample. Keep a copy of the information on each sample for your own reference.

Your name in full Ralph R. Wilde

Post-office address P. O. #641, Grants Pass, Oregon

Are you a citizen of Oregon yes Date on which sample is sent 2/23/45

Name (or names) of owners of the property Ralph R. Wilde

Name of claim sample obtained from Old Marshall and Dorothea

Location of property or source of sample (describe as accurately as possible below):

County Josephine Mining district Wolf Creek

Township 33 Range 5W Section 21 Quarter section _____

How far from passable road On two roads

For what minerals or elements do you wish the sample(s) analyzed Gold and silver

	<u>Channel (length)</u>	<u>Grab</u>	<u>Pipe</u>	<u>Description</u>
Sample No. 1	<u>vein</u>	<u>x</u>		
Sample No. 2				

IMPORTANT: A vein sample should be taken in an even channel across the vein from wall to wall. Location of sample in the workings, together with the width measured, should be recorded.

(Signed) Ralph R. Wilde

DO NOT WRITE BELOW THIS LINE - FOR OFFICE USE ONLY - USE OTHER SIDE IF DESIRED

Description _____

Sample Number	GOLD		SILVER				
	oz./T.	Value	oz./T.	Value			
FG-11-1	0.21	\$7.35	0.30	\$0.21			
FG-11-2	Trace		Trace				

Report issued _____ Card filed _____ Report mailed _____ Called for _____