



State of Oregon  
 Water Resources Department  
 725 Summer Street NE, Suite A  
 Salem, Oregon 97301-1266  
 (503) 986-0900

# Application for Permanent Water Right Transfer

## Part 1 of 5 – Minimum Requirements Checklist

**This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.**

For questions, please call (503) 986-0900, and ask for Transfer Section.

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**Check all items included with this application. (N/A = Not Applicable)**

- ✓ Part 1 – Completed Minimum Requirements Checklist.
  - ✓ Part 2 – Completed Transfer Application Map Checklist.
  - ✓ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: [http://apps.wrd.state.or.us/apps/misc/wrd\\_fee\\_calculator](http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator). If you have questions, call Customer Service at (503) 986-0801.
  - ✓ Part 4 – Completed Applicant Information and Signature.
  - ✓ Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: Certificate 38748**  
Please include a separate Part 5 for each water right. (See instructions on page 6)
- Attachments:**
- ✓ Completed Transfer Application Map.
  - Completed Evidence of Use Affidavit and supporting documentation.
  - N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
  - N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
  - N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
  - N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
  - N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500' from the surface water source and more than 1000' upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

**WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):**

- Application fee not enclosed/insufficient
- Land Use Form not enclosed or incomplete
- Additional signature(s) required
- Map not included or incomplete
- Part \_\_\_\_\_ is incomplete

Other/Explanation \_\_\_\_\_

Staff: \_\_\_\_\_ 503-986-0\_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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## Part 2 of 5 – Transfer Application Map Checklist

Your transfer application will be returned if any of the map requirements listed below are not met.

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see [http://apps.wrd.state.or.us/apps/wr/cwre\\_license\\_view/](http://apps.wrd.state.or.us/apps/wr/cwre_license_view/). CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Revised 7/1/2013

Permanent Transfer Application Form – Page 2 of 9

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**FEE WORKSHEET for PERMANENT TRANSFER ( Part 3 of 5 – Fee Worksheet**

1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,000
	Types of change proposed: <input type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>1</u> (2a)		
2	Subtract 1 from the number in line 2a = <u>0</u> (2b) <i>If only one change, this will be 0</i> Multiply line 2b by \$800 and enter » » » » » » » » » » » » » » »	2	0
3	Number of water rights included in transfer <u>1</u> (3a) Subtract 1 from the number in 3a above: <u>0</u> (3b) <i>If only one water right this will be 0</i> Multiply line 3b by \$450 and enter » » » » » » » » » » » » » » »	3	0
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 » » » » » » » » » » » » » » » » » » » <input checked="" type="checkbox"/> Yes: enter \$350 » » » » » » » » » » » » » » » » » » »	4	350
5	Do you propose to change the place of use or character of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 » » » » » » » » » » » » » » » » » » » <input type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see example below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0 or less, enter 0 on line 5 » » » » » » » » » » » » » » » » » » » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$300, then enter on line 5 » » » » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	1,350
	Is this transfer: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> endorsed in writing by ODFW as a change that will result in a net benefit to fish and wildlife habitat? If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 » If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » » » » »		
7		7	0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » <b>Transfer Fee:</b>	8	1,350

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*\*Example for Line 5a calculation* to transfer 45.0 acres of Primary Certificate 12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Certificate 87654 (1/80 cfs per acre) on the same land:

1. For irrigation calculate cfs for each water right involved as follows:
  - a. Divide total authorized cfs by total acres in the water right (*for C12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be transferred to get the transfer cfs (*x 45 ac = 0.56 cfs*).
  - b. If the water right certificate does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (*For C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
2. Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land.** The fee should be assessed only once for each “on the ground” acre included in the transfer. (*In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0.*)

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<b>FEE WORKSHEET for SUBSTITUTION</b>			
1	Base Fee (includes change to one well)	1	\$725.00
	Number of wells included in substitution _____ (2a) Subtract 1 from the number in 3a above: _____ (2b) <i>If only one well this will be 0</i> Multiply line 2b by \$350 and enter » » » » » » » » » » » » » » »		
2		2	
	Add entries on lines 1 through 2 above » » » » » » <b>Fee for Substitution:</b>	3	

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## Part 4 of 5 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <i>Alan Pedersen</i>		PHONE NO. <i>503-790-1620</i>	ADDITIONAL CONTACT NO.
ADDRESS <i>32415 SW Unger Rd</i>			FAX NO.
CITY <i>Cornelius</i>	STATE <i>OR</i>	ZIP <i>97113</i>	E-MAIL <i>Alan.pedersen58@gmail.com</i>
<b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b>			

**Agent Information** – The agent is authorized to represent the applicant in all matters relating to this application.

AGENT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.
CITY	STATE	ZIP	E-MAIL
<b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b>			

Explain in your own words what you propose to accomplish with this transfer application, and why:

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If you need additional space, continue on a separate piece of paper and attach to the application as "Attachment 1".

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

### Check One Box

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

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I understand that prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: \_\_\_\_\_

I (we) affirm that the information contained in this application is true and accurate.

*Alan Pedersen*  
Applicant signature

*Alan Pedersen*  
Print Name (and Title if applicable)

*4-14-16*  
Date

Applicant signature

Print Name (and Title if applicable)

Date

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located?  Yes  No *If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.*

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Check the following boxes that apply:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.
- Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

At this time, are the lands in this transfer application in the process of being sold?  Yes  No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see: <http://www.oregon.gov/owrd/docs/transfer-propertytransactions.pdf>

RECEIVING LANDOWNER NAME		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS		FAX NO.	
CITY	STATE	ZIP	E-MAIL

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Describe any special ownership circumstances here:

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- N/A*  Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

- N/A*  Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

 To meet State Land Use Consistency Requirements, you must list all county, city, municipal corporation, or tribal governments within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

Washington County, OR  
unincorporated

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

~~City of Corvallis~~

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## Part 5 of 5 – Water Right Information

Please use a separate Part 5 for each water right being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

CERTIFICATE # 38748

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**Description of Water Delivery System**

System capacity: ~~400~~ cubic feet per second (cfs) OR

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10.8 ~~100~~ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines and sprinklers used to divert, convey and apply the water at the authorized place of use. Franklin pump, 35gpm, PVC water lines, micro sprinklers

**Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)**  
(Note: If the POD/POA name is not specified on the certificate, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp	Rng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
<b>POA 1</b>	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	WASH 10937	1 S	3 W	25	NW	SW	2700	1080' south and 580' west from the NE corner of section 25
<b>POA 2</b>	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	WASH 68158	1 S	3 W	25	NW	SW	2401	1,058' north and 5,055' west of the SE corner of section 25
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed								
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed								

**Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):**

- |  |  |
|--|--|
| <input type="checkbox"/> Place of Use (POU)                            | <input type="checkbox"/> Supplemental Use to Primary Use (S to P)            |
| <input type="checkbox"/> Character of Use (USE)                        | <input type="checkbox"/> Point of Appropriation/Well (POA)                   |
| <input type="checkbox"/> Point of Diversion (POD)                      | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD)          | <input type="checkbox"/> Substitution (SUB)                                  |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV)                         |

**Will all of the proposed changes affect the entire water right?**

- Yes Complete only the Proposed ("to" or "on" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the water right to be changed.

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Please use and attach additional pages of Table 2 as needed.  
See page 6 for instructions.

Do you have questions about how to fill-out the tables?  
Contact the Department at 503-986-0900 and ask for Transfer Staff.

**Table 2. Description of Changes to Water Right Certificate # 38748**

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change.  
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.														
Twp	Rng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date		Twp	Rng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
																									POD #6	1901
1	S	3	W	25	NW	SW	290		2.25	irrigation	POA #2	5/19/09	POA	"												"
1	S	3	W	25	NW	SW	2700		2.25	irrigation	POA #1	5/19/09	POA	"												"
TOTAL ACRES:							2.25	TOTAL ACRES:																		

Additional remarks: additional POA only

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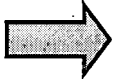
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**For Place of Use or Character of Use Changes**

N/A

Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands?  Yes  No

If YES, list the certificate, water use permit, or ground water registration numbers: \_\_\_\_\_



Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

**For Substitution** (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # \_\_\_\_\_;  
Surface water primary Certificate # \_\_\_\_\_.

N/A

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**For a change from Supplemental Irrigation Use to Primary Irrigation Use**

Identify the primary certificate to be cancelled. Certificate # \_\_\_\_\_

N/A

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**For a change in point(s) of appropriation (well(s)) or additional point(s) of appropriation:**

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

**Tip:** You may search for well logs on the Department's web page at:  
[http://apps.wrd.state.or.us/apps/gw/well\\_log/Default.aspx](http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx)

**AND/OR**

Describe the construction of the authorized and proposed well(s) in Table 3 for any wells that do not have a well log. For *proposed wells not yet constructed or built*, provide "a best estimate" for each requested information element in the table. The Department recommends you consult a licensed well driller, geologist, or certified water right examiner to assist with assembling the information necessary to complete Table 3.

**Table 3. Construction of Point(s) of Appropriation**

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well. OWRD Well ID Tag No. L_____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right

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# WASH 68758

STATE OF OREGON  
 WATER SUPPLY WELL REPORT  
 (as required by ORS 537.765 & OAR 690-205-0210)

WELL LABEL # L 93024  
 START CARD # 196338

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Instructions for completing this report are on the last page of this form.

**(1) LAND OWNER** Owner Well I.D.  
 First Name ALAN Last Name PEDERSON  
 Company \_\_\_\_\_  
 Address 32415 SW UNGER RD  
 City CORNELIUS State OR Zip 97113

**(2) TYPE OF WORK**  New Well  Deepening  Conversion  
 Alteration (repair/recondition)  Abandonment

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Reverse Rotary  Other \_\_\_\_\_

**(4) PROPOSED USE**  Domestic  Irrigation  Community  
 Industrial/Commercial  Livestock  Dewatering  Injection  
 Thermal  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Standard SALEM OR Yes (attach copy)  
 Depth of Completed Well 225 ft.

BORE HOLE			SEAL				
Dia	From	To	Material	From	To	Amount	Scks/lbs
10"	0	21	BENTONITE	0	21	550	LBS
6"	21	100					
8"	100	111	CEMENT SBCEL	100	111	300	LBS
6"	111	225					

How was seal placed: Method  A  B  C  D  E  
 Other 3/8" #8 BENTONITE POURED DRY - PORTLAND CEMENT - BAUER  
 Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
 Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
 Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

**(6) CASING/LINER**

Csng	Lnr	Dia	+	From	To	Gauge	Steel	Plastic	Welded	Thrd
X		6	+	1	111	.250	X		X	

Shoe  Inside  Outside  Other Location of shoe(s) 111'  
 Temporary casing  Yes Diameter \_\_\_\_\_ From \_\_\_\_\_ To \_\_\_\_\_

**(7) PERFORATIONS/SCREENS**  
 Perforations Method \_\_\_\_\_  
 Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf	Scrn	Csng	Lnr	Screen Dia	From	To	Screen/slot width	Slot length	# of slots	Tele/pipe size
<del>_____</del>										

**(8) WELL TESTS: Minimum testing time is 1 hour**  
 Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
75 GPM		100'	1 HR
40 GPM		40'	1/4 HR
20 GPM		25'	1/4 HR

Temperature 54 °F Lab analysis  Yes By \_\_\_\_\_  
 Water quality concerns?  Yes (describe below) \_\_\_\_\_  

From	To	Description	Amount	Units
<del>_____</del>				

**(9) LOCATION OF WELL (legal description)**  
 County WASHINGTON Twp LS N or S Range 3-W E or W W.M.  
 Sec 25 NW 1/4 of the SW 1/4 Tax Lot 290W  
 Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
 Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street Address of Well (or nearest address) SAME

**(10) STATIC WATER LEVEL**

Existing Well/Deepening Completed Well	Date	SWL (psi)	+	SWL (ft)
	<u>3-25-10</u>			<u>3 1/2</u>

Flowing Artesian?  Yes Dry Hole?  Yes

**WATER BEARING ZONES** Depth water was first found 160'

SWL Date	From	To	Est Flow	SWL (psi)	+	SWL (ft)
<u>3-23-10</u>	<u>160</u>	<u>214</u>	<u>100+</u>			<u>3 1/2</u>

**(11) WELL LOG** Ground Elevation Approx 230'

Material	From	To
TOPSOIL	0	2
CLAY BROWN	2	15
CLAY BLUE	15	45
" REDISH BROWN	45	92
" BROWN-W-BROWN SAND	92	96
BASALT DECOMPOSED BROWN	96	105
" BLACK MED HARD	105	140
" BLACK-BROWN WITH OCC FRACTURE ZONES-SOFT-MED	140	160
" BROWN-BLACK HEAVY FRAC.	160	187
" GREY HARD	187	192
" BROWN BLACK-W-RED SANDERS SOFT FRACTURED	192	207
" BLUE BLACK VASCULAR SOFT	207	214
" BLACK FIRM	214	225

Date Started 17 MARCH 10 Completed 23-MARCH 10

**(unbonded) Water Well Constructor Certification**  
 I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number 1538 Date 25-MARCH-2010  
 Signed [Signature]

**(bonded) Water Well Constructor Certification**  
 I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 602 Date 3/26/2010  
 Signed [Signature]  
 Contact Info. (optional) A.J. GAUNT & SON  
Gaston, Oregon 503-985-7999

