



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.

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. 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 93512**
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):

- | | |
|--------------------------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> Application fee not enclosed/insufficient | <input type="checkbox"/> Map not included or incomplete |
| <input type="checkbox"/> Land Use Form not enclosed or incomplete | <input type="checkbox"/> Part _____ is incomplete |
| <input type="checkbox"/> Additional signature(s) required | |

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/. 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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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	\$1,160
	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 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b)</u> If only one change, this will be 0 Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	\$0
	Number of water rights included in transfer <u>1 (3a)</u> Subtract 1 from the number in 3a above: <u>0 (3b)</u> If only one water right this will be 0 Multiply line 3b by \$520 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 \$410 » » » » » » » » » » » » » » » » » » » »	4	\$410
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 \$350, then enter on line 5 » » » » » » » » » »	5	\$0
6	Add entries on lines 1 through 5 above » » » » » » » » » » » » » » » » Subtotal:	6	\$1,570
7	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	\$0
8	Subtract line 7 from line 6 » » » » » » » » » » » » » » » » Transfer Fee:	8	\$1,570

*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:

- For irrigation calculate cfs for each water right involved as follows:
 - Divide total authorized cfs by total acres in the water right (for C12345, $1.25 \text{ cfs} \div 100 \text{ ac}$); then multiply by the number of acres to be transferred to get the transfer cfs ($x 45 \text{ ac} = 0.56 \text{ cfs}$).
 - 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, $45.0 \text{ ac} \times 0.0125 \text{ cfs/ac} = 0.56 \text{ cfs}$)
- 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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FEE WORKSHEET for SUBSTITUTION

1	Base Fee (includes change to one well)	1	\$840.00
	Number of wells included in substitution _____ (2a) Subtract 1 from the number in 3a above: _____ (2b) If only one well this will be 0 Multiply line 2b by \$410 and enter » » » » » » » » » » » » » » » »	2	
3	Add entries on lines 1 through 2 above » » » » » » Fee for Substitution:	3	NA

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Ray Gannon		PHONE NO. (503) 781-6304	ADDITIONAL CONTACT NO.
ADDRESS 3491 Brooklake Rd NE		FAX NO.	
CITY Salem	STATE OR	ZIP 97303	E-MAIL
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.			

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

AGENT/BUSINESS NAME Doann Hamilton/Pacific Hydro-Geology, Inc.		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946 (cell)
ADDRESS 18487 S. Valley Vista Road		FAX NO. (503) 632-5983	
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.com
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.			

Explain in your own words what you propose to accomplish with this transfer application, and why:
This water right is shared, with the authorized wells located on the neighbor's property. We wish to use an existing well located on our property.

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.

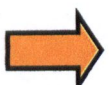
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I understand that prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once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

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



 Applicant Signature	<u>Ray Gannon</u> Print Name and title if applicable	<u>3/16/18</u> 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.*

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 NA			PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS				FAX NO.
CITY	STATE	ZIP	E-MAIL	

Describe any special ownership circumstances here: NA

- 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 NA	ADDRESS	
CITY	STATE	ZIP

- 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 Clackamas Co. Department of Transportation and Development, Planning Division	ADDRESS 150 Beaver Creek Road	
CITY Oregon City	STATE Oregon	ZIP 97045

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ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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 # 93512

Description of Water Delivery System

System capacity: 1.19 cubic feet per second (cfs) **OR**
 _____ gallons per minute (gpm)

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. Water is appropriated from Well 1 using a 30-Hp pump, and from Well 2 using a 40-Hp pump. Water is conveyed through 5-inch and 6-inch buried PVC mainlines and 3-inch above-ground aluminum laterals. Water is applied to the authorized place of use via Rain Bird sprinklers with 1/8-inch sized nozzles or a big gun with a 1.1-inch nozzle.

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	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	CLAC 12700	4 S	1 E	32	SE	NE	Lot 4	550 feet north and 1,250 feet west from the E ¼ corner, Section 32.
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	CLAC 51287	4 S	1 E	32	SE	NW	Lot 3	50 feet north and 50 feet west from the center ¼ corner, Section 32.
Well 2 Certificate 86986	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CLAC 12713	4 S	1 E	32	SE	SW	1401	720 feet north from the S ¼ corner, Section 32.

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 checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input 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 # 93512

List the change proposed for the acreage in each ¼ ¼. 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	¼ ¼	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	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date			
4	S	1	E 32	SE NW	905	Lot 2	14.4	Nursery	Authorized Well 2	7-25-2001	POA	4	S	1	E 32	SE NW	905	Lot 2	14.4	Nursery	Well 2 Certificate 86986	7-25-2001	
4	S	1	E 32	NE SW	905	NA	18.7	Nursery	Authorized Well 2	7-25-2001	POA	4	S	1	E 32	NE SW	905	NA	18.7	Nursery	Well 2 Certificate 86986	7-25-2001	
TOTAL ACRES:						33.1						TOTAL ACRES:						33.1					

Additional remarks: None.



For Place of Use or Character of Use Changes - NA

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

If YES, list the certificate, water use permit, or ground water registration numbers: NA.

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 # NA:
Surface water primary Certificate # NA.

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For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

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

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
Well 1	Yes	See Well log CLAC 12700								
Authorized Well 2	Yes	See Well log CLAC 51287								
Well 2 Certificate 86986	Yes	See Well log CLAC 12713								

Application for Water Right Transfer

Evidence of Use Affidavit



Oregon Water Resources Department
 725 Summer Street NE, Suite A
 Salem, Oregon 97301-1266
 (503) 986-0900
 www.wrd.state.or.us

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss
 County of CLACKAMAS)

I, RAY GANNON, in my capacity as OWNER / OPERERATOR,
 mailing address ³⁴⁹¹ 2591 BROOKLAKE RD NE, SALEM, OR 97303
 telephone number (503) 781-6304, being first duly sworn depose and say:

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1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

- Water was used during the previous five years on the **entire** place of use for Certificate # ____; **OR**
- My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

OR

- Confirming Certificate # 93512 has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: ____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # ____ (For Historic POD/POA Transfers)

(continues on reverse side)

A 1570.00 to Ore Water resource dept.

3. The water right was used for: (e.g., crops, pasture, etc.): In-ground nursery stock
4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

Ray Cannon
Signature of Affiant

3/5/18
Date

Signed and sworn to (or affirmed) before me this 5 day of March, 2018.



Amanda Nichole Winter
Notary Public for Oregon

My Commission Expires: NOV. 17, 2018

Supporting Documents	Examples
<input checked="" type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> • Power usage records for pumps associated with irrigation use • Fertilizer or seed bills related to irrigated crops • Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> • District assessment records for water delivered • Crop reports submitted under a federal loan agreement • Beneficial use reports from district • IRS Farm Usage Deduction Report • Agricultural Stabilization Plan • CREP Report
<input type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terraserver.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

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STATE OF OREGON
WATER WELL REPORT
 (as required by ORS 537.765)

JUN 27 1988

WATER RESOURCES DEPT.

S.Well Number OREGON

CLM
 012700

START CARD
 530
 4/1E-322

(1) OWNER:

Name JOEL NEUSCHWANDER
 Address 6059 S WHISKEY HILL RD
 City HUBBARD State OR Zip _____

(2) TYPE OF WORK:

New Well Deepen Recondition Abandon

(3) DRILL METHOD

Rotary Air Rotary Mud Cable
 Other _____

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 154 ft.
 Explosives used Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	Depth	Material	Depth	sacks	or pounds
12	1 to 20	GRANULAR	1 to 20	11	
8	20 to 154	BENTONITE			

How was seal placed: Method A B C D E

Other GRANULAR BENTONITE METHOD

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from 75 ft. to 90 ft. Size of gravel PEA

(6) CASING/LINER:

Casing:	Diameter	From	To	Gauge	Material			
					Steel	Plastic	Welded	Threaded
	8	0	154	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Location of shoe(s) 154

(7) PERFORATIONS/SCREENS:

Perforations Method DRIVE DOWN
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
88	150	3/16 X 1/4	400			<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Time
500	46	PUMP	1 hr.
300	21	AIR LIFT	3

(9) LOCATION OF WELL by legal description:

County CLATSOP Longitude _____
 Township 45 N or S, Range 1E E or W, WM.
 Section 32 1/4 SE 1/4
 Tax Lot _____ Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) S. NEEDY RD, CANBY

(10) STATIC WATER LEVEL:

29 ft. below land surface. Date 5/25/88
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 31

From	To	Estimated Flow Rate	SWL
82	102	800 GPM	30
115	132	500 GPM	30

(12) WELL LOG:

Ground elevation _____

Material	From	To	SWL
SOIL	1	3	
CLAY BROWN	3	31	
SAND BROWN	31	31	
CLAY GREY	31	42	
CEMENTED GRAVEL	42	63	
CLAY DK GREY	63	70	
SILT BLACK	70	82	
SAND BLACK FINE	82	92	
CEMENTED GRAVEL	92	105	
CLAY BLUE STICKY	105	115	
CLAY GREY w/ GREY	115	132	
SAND LAYERS			
CLAY GREEN	132	144	
SILT DARK BROWN.	144	147	
CLAY BLUE GREEN	147	154	

INITIALLY PERFORATED 115 TO 150' AND PRODUCED 150 GPM, TOTAL. THEN GRAVEL PACKED 75-102 & 115-132, PERFORATED 88' TO 115'. THEN PRODUCED 300 GPM WITH 21 DRAWDOWN.

Date started 5/13/88 Completed 5/25/88

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon well construction standards. Materials used and information reported above are true to my best knowledge and belief.

Signed _____ Date _____ WWC Number _____

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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 well construction standards. This report is true to the best of my knowledge and belief.

Signed Richard Beck Date 5/25/88 WWC Number 243

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"START CARD"
NOTICE OF BEGINNING OF WELL CONSTRUCTION
(as required by ORS 537.762)

WATER RESOURCES DEPT.
SALEM, OREGON

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

Owner's Name and Mailing Address JOEL NEUSCHWANDER
6097 S WHISKEY HILL RD
HUBBARD OR

Proposed Commencement Date MAY 12, 1988

Proposed Well Depth 160 Diameter 8
and Use:
 Domestic Community Industrial Irrigation
 Thermal Injection Other

Proposed Well Location: County CLATSOP
Township 4S (N of S) Range 1E (E or W) Section 32

1. SE 1/4 of above section

At least 2 of these must be provided

2. street address of well location _____

3. tax lot number of well location _____

4. attach approved map with location identified.
(see reverse of this form for approved maps)

We hereby certify that we have read the back of this form, and that to the best of our knowledge the information provided herein is accurate and the well is being properly located from septic tanks and septic drain fields.

x Joel Neuschwander
Owner's Signature

x Richard Beck
Bonded Water Well Constructor

Owner
4/16/88
Date

License No. 743
Company Beck Well Drilling

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.

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

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OCT - 4 1971

WATER WELL REPORT

CLAC

4/1-32

STATE ENGINEER, SALEM, OREGON (Please type or print) State Well No. 012713
SALEM, OREGON (Do not write above this line) State Permit No. _____

(1) OWNER:
Name Don Hanson - Twin Creek Farms
Address Rt. Box 340, Camby, Ore. 97013

(2) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL: Rotary Driven
Cable Jetted
Dug Bored
(4) PROPOSED USE (check): Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED: Threaded Welded
12" Diam. from 0 ft. to 155 ft. Gage .250
18" Diam. from 0 ft. to 60 ft. Gage .250

PERFORATIONS: Perforated? Yes No.
Type of perforator used _____
Size of perforations in. by in.
perforations from ft. to ft.

(7) SCREENS: Well screen installed? Yes No
Manufacturer's Name Rosco Moss
Type Louvered Model No. _____
Diam. 12 Slot size 1/4 Set from 105 ft. to 155 ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
Yield: 500 gal./min. with 30 ft. drawdown after 5 hrs.
800 " 45 " 4 "
1000 " 70 " 10 "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION: Well seal—Material used Bentonite - Cement Grout
Well sealed from land surface to 60 ft.
Diameter of well bore to bottom of seal 24 in.
Diameter of well bore below seal 12 in.
Number of sacks of cement used in well seal 8 sacks
Number of sacks of bentonite used in well seal 7 sacks
Brand name of bentonite National
Number of pounds of bentonite per 100 gallons of water _____ lbs./100 gals.
Was a drive shoe used? Yes No Plugs _____ Size: location _____ ft.
Did any strata contain unusable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____
Was well gravel packed? Yes No Size of gravel: 1/4 3/4
Gravel placed from 60 ft. to 160 ft.

(10) LOCATION OF WELL:
County Clackamas Driller's well number _____
1/4 Section 32 T. 4S R. 1E W.M.
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.
Depth at which water was first found 60 ft.
Static level 32 ft. below land surface. Date _____
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG: Diameter of well below casing 6"
Depth drilled 345 ft. Depth of completed well 155 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
Topsoil-Brown	0	3	
Clay-Brown	3	20	
Clay-Blue	20	60	
Clay-Bl-Sandy-Blk-Fine-Water trace	60	64	
Clay-Br-Sand seams-Fine-Br	64	94	
Sand-Blk-Fine-Clay-Blue	94	125	
Sand-Blk-Fine-Gravel traces	125	160	
Fine-Clay-Blue			
Clay-Bl-Sand streaks-Fine gravel	160	180	
Sand-Blk-Claystone-Blue	180	190	
Clay-Green-Blue	190	195	
Clay-Blue	195	200	
Clay-Gray	200	230	
Claystone-Blue	230	275	
Gravel-Lrg-Clay-Blue	275	278	
Claystone-Blue	278	290	
Claystone-Gray-Blue	290	300 (Cont)	

Work started 5-29 1971 Completed 9-7 1971
Date well drilling machine moved off of well 9-7 1971

Drilling Machine Operator's Certification:
This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Bennett Skinner Date 9-25, 1971
(Drilling Machine Operator)
Drilling Machine Operator's License No. 277

Water Well Contractor's Certification:
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name S & M Drilling & Supply
(Person, firm or corporation) (Type or print)
Address Rt. 1 Box 31, Camby, Ore. 97013
[Signed] Bennett Skinner
(Water Well Contractor)
Contractor's License No. 520 Date 9-25, 1971

NOTICE TO WATER WELL CONTRACTOR

The original and first copy of this report are to be filed with the

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WATER WELL REPORT

OCT - 4 1971 STATE OF OREGON

STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion.

STATE ENGINEER SALEM OREGON

(Please type or print)

(Do not write above this line)

State Well No. 4/1-32

State Permit No.

(1) OWNER: (Cont.)

Name Address

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

(4) PROPOSED USE (check):

Rotary Cable Dug Driven Jettied Bored Domestic Industrial Municipal Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded

Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? Yes No

Type of perforator used Size of perforations in. by in. perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name Type Model No. Diam. Slot size Set from ft. to ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? Yield: gal./min. with ft. drawdown after hrs. Baizer test gal./min. with ft. drawdown after hrs. Artesian flow g.p.m.

Temperature of water Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Well seal-Material used Well sealed from land surface to ft. Diameter of well bore to bottom of seal in. Number of sacks of cement used in well seal sacks Number of sacks of bentonite used in well seal sacks Brand name of bentonite Number of pounds of bentonite per 100 gallons of water lbs./100 gals. Was a drive shoe used? Plugs Size: location ft. Did any strata contain unusable water? Type of water? depth of strata Method of sealing strata off Was well gravel packed? Size of gravel: Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Driller's well number 1/4 1/4 Section T. R. W.M. Bearing and distance from section or subdivision corner

(11) WATER LEVEL: Completed well.

Depth at which water was first found ft. Static level ft. below land surface. Date Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing

Depth drilled ft. Depth of completed well ft.

Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

Table with columns: MATERIAL, From, To, SWL. Rows: Claystone-Sandstone seams-Water, Sand-Fine-Gray-Blank

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Work started 19 Completed 19 Date well drilling machine moved off of well 19

Drilling Machine Operator's Certification:

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

[Signed] Bennett Skinner Date 19

Drilling Machine Operator's License No.

Water Well Contractor's Certification:

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

Name (Person, firm or corporation) (Type or print)

Address

[Signed] Bennett Skinner (Water Well Contractor)

Contractor's License No. Date 19

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TAG # L02078

STATE OF OREGON WATER SUPPLY WELL REPORT (as required by ORS 537.765)

CLAC 51287

JAN - 9 1997

62424

(START CARD) #

WATER RESOURCES DEPT.

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

SALEM, OREGON

(1) OWNER:

Name Neuschwander's Nursery Address 6097 S. Whiskey Hill Rd City Hubbard State Or Zip 97032

(2) TYPE OF WORK

[X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(3) DRILL METHOD:

[] Rotary Air [] Rotary Mud [X] Cable [] Auger [] Other

(4) PROPOSED USE:

[] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval [] Yes [] No Depth of Completed Well 140 ft. Explosives used [] Yes [] No Type Amount

HOLE

SEAL

Table with columns: Diameter, From, To, Material, From, To, Sacks or pounds. Row 1: B, 50, 140, Bentonite, 1, 50, 35 sacks

How was seal placed: Method [] A [] B [] C [] D [] E

[X] Other Granular Bentonite method

Backfill placed from ft. to ft. Material

Gravel placed from 60 ft. to 120 ft. Size of gravel pea

(6) CASING/LINER:

Table with columns: Diameter, From, To, Gauge, Steel, Plastic, Welded, Threaded. Rows for Casing and Liner.

Final location of shoe(s) 140

(7) PERFORATIONS/SCREENS Drive Down

[X] Perforations Method

[] Screens Type Material

Table with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner. Row 1: 76, 117, .188, 600, 105, 4 hr

(8) WELL TESTS: Minimum testing time is 1 hour

[] Pump [] Bailer [X] Air [] Artesian

Table with columns: Yield gal/min, Drawdown, Drill stem at, Time. Row 1: 220, 105, air line @, 4 hr

Temperature of water 53 Depth Artesian Flow Found

Was a water analysis done? [] Yes By whom

Did any strata contain water not suitable for intended use? [] Too little

[] Salty [] Muddy [] Odor [] Colored [] Other

Depth of strata:

(9) LOCATION OF WELL by legal description:

County CLACKAMAS Latitude Longitude Township 4s N or S Range 1e E or W. WM. Section 32 Se 1/4 Nw 1/4 Tax Lot 900 Lot Block Subdivision Street Address of Well (or nearest address) 29435 S Needy Rd

(10) STATIC WATER LEVEL:

47 ft. below land surface. Date Sep 10, 1996 Artesian pressure lb. per square inch. Date

(11) WATER BEARING ZONES:

Depth at which water was first found 40

Table with columns: From, To, Estimated Flow Rate, SWL. Row 1: 40, 140, 47

(12) WELL LOG:

Ground Elevation

Table with columns: Material, From, To, SWL. Rows: Soil, Clay, Brown, Cemented gravel, brown, Clay, grey, Clay, grey, sandy, Sand, black, fine, Sand and gravel, black, Cemented gravel, sand, Sand & gravel, Clay, blue, clay, grey, silty, Silt, dark grey, Clay w/black coarse sand, Clay, grey w/some cemented gravel, Clay, blue

Note: 6 inch gravel feed each side of 8 inch well

Date started August 8, 1996 Completed Dec 10, 1996

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, 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.

Signed [Signature] WWC Number Date

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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.

Signed [Signature] WWC Number 243 Date 1/4/97

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