



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

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

This permit amendment 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 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 Permits to be Amended: **Number of permits to be amended: 1 List them here: Permit G-11627**
Please include a separate Part 5 for each permit. (See instructions on page 6)
- Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at http://www.oregon.gov/owrd/pubs/docs/forms/req_assign_8_21_09.pdf). Assignment is not needed if the applicant is the permit holder of record.
- N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant, **or** other permit holders of record that are not listed as applicants.
- N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form is not required if any of the following apply:
 - Water is to be diverted, conveyed, and/or used only on federal lands.
 - 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.
 - The proposed changes are all located on the property reviewed in Land Use form enclosed in Water Right Application Folder # **G-12589**.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s) or additional point(s) of appropriation).

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(For Staff Use Only)

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

___ Application fee not enclosed/insufficient	___ Map not included or incomplete
___ Land Use Form not enclosed or incomplete	___ Assignment Form and fee not enclosed/insufficient
___ Additional signature(s) required	Part ___ is incomplete

Other/Explanation _____

Staff: _____ 503-986-0_____ Date: ____/____/____

Part 2 of 5 – Permit Amendment Map Checklist

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

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

- N/A If **more than three** permits are involved, separate maps for each permit.
- 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 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 use permit, 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 permit is being changed, a separate hachuring is needed for the portion of the permit left unchanged.
- N/A If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, 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 use 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 (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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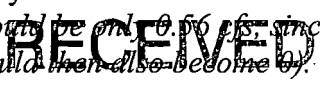
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Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,160
2	Types of change proposed: <input checked="" type="checkbox"/> Place of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>2 (2a)</u> Subtract 1 from the number in line 2a = <u>1 (2b)</u> <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	\$930
3	Number of permits included in Permit Amendment <u>1 (3a)</u> Subtract 1 from the number in 3a: <u>0 (3b)</u> <i>If only one permit this will be 0</i> 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? <input type="checkbox"/> No: enter 0 on line 5 » <input checked="" type="checkbox"/> Yes: enter the cfs for the portions of the permits to be amended (see example below*): <u>2.93 (5a)</u> Subtract 1.0 from the number in 5a above: <u>1.93 (5b)</u> If 5b is 0, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: <u>2.0 (5c)</u> and multiply 5c by \$350, then enter on line 5 » » » » » » » » » »	5	\$700
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$3,200
7	Is this permit amendment: <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 » » » » » » » » » » Permit Amendment Fee:	8	\$3,200

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

1. For irrigation calculate cfs for each permit involved as follows:
 - a. Divide total authorized cfs by total acres in the permit (*for S-12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be changed to get the application cfs (*x 45 ac = 0.56 cfs*).
 - b. If the water right permit 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 S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
2. Add cfs for the portions of permits on all the land included in the application; however **do not count cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land.** The fee should be assessed only once for each “on the ground” acre included in the application. (*In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0.*)



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Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Eagle Creek Golf Course Inc. c/o Jim Bastasch			PHONE NO. (503) 927-6470	ADDITIONAL CONTACT NO.
ADDRESS 25805 SE Dowty Rd				FAX NO.
CITY Eagle Creek	STATE OR	ZIP 97022	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			PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 632-5983 (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 permit amendment; and why:
My father (Frank Bastasch) and his brother (John Bastasch) ran the golf course. My father developed Alzheimer's and John passed away in 2015. I have now taken over the project and have come to understand the wells and place of use were not developed according to the permit conditions. Taking over the project, I am filing this permit amendment to correct some of those differences.

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)

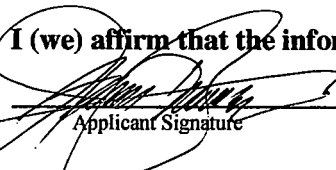
Is the applicant the permit holder of record? Yes No

If NO, include either:

- A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

I understand that prior to Department approval of the permit amendment, 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 permit 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: Oregonian

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


 Applicant Signature
 Applicant Signature

James Bastasch
 Print Name and title if applicable
 Print Name and title if applicable

10/14/2018
 Date
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 Date

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Check one of the following:

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

Check the appropriate box, if applicable:

- Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

- Check here if water for any of the permits 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 local governments (each county, city, municipal corporation, or tribal government) 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

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 5 of 5 – Water Use Permit Information

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

PERMIT # G-11627

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

POD/POA Name or Number	Is this POD/POA Authorized by the permit 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)
Authorized Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NA	3 S	4 E	6	NW	SW	DLC 45	2,400 feet north and 100 feet east from the SW corner, Section 6.
Authorized Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NA	3 S	3 E	1	NE	SE	DLC 41	2,000 feet north and 50 feet west from the SW corner, Section 6.
Authorized Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NA	3 S	4 E	6	SW	SW	DLC 45	1,130 feet north and 110 feet east from the SW corner, Section 6.
Proposed Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CLAC 20012	3 S	3 E	1	NE	SE	DLC 41	1,965 feet north and 190 feet west from the SE corner, Section 1.
Proposed Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CLAC 50087	3 S	3 E	1	SE	SE	DLC 41	985 feet north and 245 feet west from the SE corner, Section 1.
Proposed Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CLAC 61102	3 S	3 E	1	SE	SE	DLC 40	70 feet north and 40 feet west from the SE corner, Section 1.

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

- | | |
|---|--|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input checked="" 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"/> Surface water POD to Ground Water POA (SW/GW) |

Will all of the proposed changes affect the entire water use permit?

- Yes Complete only the proposed ("to" 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 permit to be changed.

For a change in place of use:

Does the permit holder of record own or control the land TO which the place of use is being moved?

- Yes No

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If NO, the landowner of the land TO which the place of use is being **moved must be assigned to the permit as a permit holder of record** by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? Yes No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use **unless** the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

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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 Use Permit # 11627

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 (if applicable)	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 (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date			
									POU, POA, APOA	2	S	3	E	36	SW	SE	1400	DLC 52	5.0	Authorized Well 3, Proposed Well 1,2 & 4	June 24, 1991
									POU, POA, APOA	2	S	3	E	36	SE	SE	1400	DLC 52	10.4	Authorized Well 3, Proposed Well 1,2 & 4	June 24, 1991
									POU, POA, APOA	2	S	4	E	31	SW	SW	190	DLC 43	2.5	Authorized Well 3, Proposed Well 1,2 & 4	June 24, 1991
									POU, POA, APOA	3	S	3	E	1	NE	NE	1400, 400	DLC 42	7.1	Authorized Well 3, Proposed Well 1,2 & 4	June 24, 1991
									POU, POA, APOA	3	S	3	E	1	NE	NE	300	DLC 41	10.4	Authorized Well 3, Proposed Well 1,2 & 4	June 24, 1991
									POU, POA, APOA	3	S	3	E	1	NW	NE	1400, 400	DLC 42	2.0	Authorized Well 3, Proposed Well 1,2 & 4	June 24, 1991

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

If YES, list the other certificate, permit, or ground water registration numbers: _____

If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

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://apps2.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
Authorized Well 1	No	NA								PER APPLICATION G-12589
Authorized Well 2	No	NA								PER APPLICATION G-12589
Authorized Well 3	No	NA								PER APPLICATION G-12589
Proposed Well 1	Yes	CLAC 20012								SEE WELL LOG CLAC 20012
Proposed Well 2	Yes	CLAC 50087								SEE WELL LOG CLAC 50087
Proposed Well 4	YES	CLAC 61102								SEE WELL LOG CLAC 61102

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35/4E/6CC
69073

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

JAN 13 1995

(START CARD)

CLAC
20012

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

(1) OWNER: Well Number 1
Name Eagle Creek Golf Course
Address 25805 S.E. Dunlap Rd
City Eagle Creek State OR Zip 97022

(9) LOCATION OF WELL by legal description:
County Clack Latitude _____ Longitude _____
Township 3 N or S Range 4 E or W. WM.
Section 6 SW 1/4 SW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Same as #1

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

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(10) STATIC WATER LEVEL:
15 ft. below land surface. Date 7-21-94
Artesian pressure _____ lb. per square inch. Date _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(11) WATER BEARING ZONES:
Depth at which water was first found 21 ft

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 60 ft.
Explosives used Yes No Type _____ Amount _____

From	To	Estimated Flow Rate	SWL
<u>21</u>	<u>58</u>	<u>30</u>	<u>15</u>

HOLE		SEAL		Sacks or pounds	
Diameter	From To	Material	From To		
<u>10</u>	<u>0</u> <u>18</u>	<u>Granular</u>	<u>0</u> <u>18</u>	<u>12</u>	<u>BAGS</u>
<u>6"</u>	<u>18</u> <u>60</u>	<u>Bentonite</u>			

How was seal placed: Method A B C D E
 Other Poured Dry
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(12) WELL LOG:
Ground Elevation _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>6 3/4"</u>	<u>+1</u>	<u>58</u>	<u>250</u>	<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"/>

Material	From	To	SWL
<u>Soil Brown</u>	<u>0</u>	<u>1</u>	
<u>Clay Brown w/cobbles</u>	<u>1</u>	<u>6</u>	
<u>Cobble w/large gravel</u>	<u>6</u>	<u>19</u>	
<u>Med-gravel w.B.</u>	<u>19</u>	<u>58</u>	<u>15</u>
<u>Clay Grey sticky</u>	<u>58</u>	<u>60</u>	

Final location of shoe(s) 58'

(7) PERFORATIONS/SCREENS:

Perforations Method Air Perforator
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
<u>25</u>	<u>56</u>	<u>1/8"</u>	<u>4</u>	<u>Rows</u>		<input checked="" type="checkbox"/>	<input type="checkbox"/>

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(8) WELL TESTS: Minimum testing time is 1 hour
 Pump Bailor Air Flowing Artesian
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____
30 5.5 1 hr.
30 5.5 2 hr.

Date started 7-20-94 Completed 7-21-94
(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.

Temperature of water 52° 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: _____

WVC Number _____
Signed _____ 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.
WVC Number 792
Signed Jack Wallcut Date 8-5-94

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

CLAC
50087

JAN - 5 1996

(START CARD) # ~~925~~ 92050

Instructions for completing this report are on the last page of WATER RESOURCES DEPT.

(1) OWNER:

Well Number 2 SALEM
Name Eagle Creek Golf Course
Address 25805 S.E. County Rd
City Eagle Creek State OR Zip 97022

(2) TYPE OF WORK

New Well Deepening Alteration (repair/recondition) Abandonment

(3) DRILL METHOD:

Rotary Air Rotary Mud Cable Auger
 Other

(4) PROPOSED USE:

Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other

(5) BORE HOLE CONSTRUCTION:

Special Construction approval Yes No Depth of Completed Well 305 ft.
Explosives used Yes No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10	0	39	Cement	0	39	31
6	39	305				

How was seal placed: Method A B C D E
 Other

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: <u>6 5/8</u>	<u>+3</u>	<u>297.250</u>	<u>250</u>	<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"/>

Final location of shoe(s) 297

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Material	Telephone size	Casing	Liner

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

Yield gal/min	Drawdown	Drill stem at	Time
<u>65</u>		<u>295</u>	<u>1 hr.</u>

Temperature of water 52 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 SHALLOW
Depth of strata 20-30 ft.

(9) LOCATION OF WELL by legal description:

County Clack. Latitude _____ Longitude _____
Township 3 N or S Range 4 E or W. WM.
Section 6 SW 1/4 SW 1/4
Tax Lot _____ Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) same as above

(10) STATIC WATER LEVEL:

85 ft. below land surface. Date _____
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found 20-30 ft.

From	To	Estimated Flow Rate	SWL
<u>20</u>	<u>30</u>	<u>15</u>	<u>4</u>
<u>299</u>	<u>305</u>	<u>65</u>	<u>85</u>

(12) WELL LOG:

Material	From	To	SWL
<u>50% Brown w/ cobbles</u>	<u>0</u>	<u>3</u>	
<u>Clay Brown w/ cobbles</u>	<u>3</u>	<u>14</u>	
<u>Gravel + cobbles</u>	<u>14</u>	<u>20</u>	
<u>Cemented slightly</u>			
<u>Gravel + cobbles med</u>	<u>20</u>	<u>31</u>	
<u>Clay yellow Brown</u>	<u>31</u>	<u>32</u>	
<u>Clay Blue Grey sticky</u>	<u>32</u>	<u>91</u>	
<u>Clay Grey Fine</u>	<u>91</u>	<u>137</u>	
<u>Clay Grey sticky</u>	<u>137</u>	<u>189</u>	
<u>Clay Grey Dark</u>	<u>189</u>	<u>241</u>	
<u>Clay Blue sticky</u>	<u>241</u>	<u>259</u>	
<u>Clay Blue Green sticky</u>	<u>259</u>	<u>298</u>	
<u>SAND Course w/</u>			
<u>Gravel smack + LRG</u>	<u>298</u>	<u>304</u>	<u>85</u>
<u>pcs of Tan Pumice</u>			
<u>Clay Grey sticky</u>	<u>304</u>	<u>305</u>	

Date started 11-12-95 Completed 11-17-95

(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.

WVC Number _____
Signed _____ 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.

WVC Number 792
Signed Eric Walborn Date 11-30-95

MAY 19 2005

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

WATER RESOURCES DEPT
SALEM, OREGON

CLAC
61102

WELL ID. # L 69067
START CARD # 157173

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

(1) LAND OWNER
Name JOHN BASTASCH Well Number _____
Address 29255 S.E. FOLSOM RD.
City EAGLE CR. State ORE. Zip 97022

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

(3) DRILL METHOD:
 Rotary Air Rotary Mud Cable Auger
 Other _____

(4) PROPOSED USE:
 Domestic Community Industrial Irrigation
 Thermal Injection Livestock Other _____

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 302 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	32	CEMENT	0	37	23
6"	32	302				

How was seal placed: Method A B C D E
 Other _____

Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	0	299	250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 4 1/2"	262	302	26	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
Final location of shoe(s) 299'

(7) PERFORATIONS/SCREENS:

Perforations Method SKILL SAW
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
272	302	1/4 x 9	110			<input type="checkbox"/>	<input checked="" type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Flowing Time
90		302	1 hr.

Temperature of water 57° 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: 3 TO 26 FEET

(9) LOCATION OF WELL by legal description:
County Chackamas Latitude _____ Longitude _____
Township 3S S Range 4E E. W. WM.
Section 7 NW 1/4 NW 1/4
Tax Lot 00203 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) Same

(10) STATIC WATER LEVEL:
135 ft. below land surface. Date 5-29-04
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL
3'	29'	12	3'
294	302	90	135'

(12) WELL LOG: JUN 27 2005
Ground Elevation _____ WATER RESOURCES DEPT
SALEM, OREGON

Material	From	To	SWL
SOIL BROWN	0	3	
GRAVELS	3	26	
Clay GRAY STICKY	29	52	
Clay GRAY SOFT	52	54	
Clay GREEN	54	92	
Clay GRAY	92	105	
Clay GREEN SOFT	105	116	
Clay GRAY	116	132	
Clay GREEN	132	157	
Clay GRAY with SANDS & WOOD	157	166	
Clay GRAY	166	180	
Clay GREEN	180	215	
Clay GRAY	215	256	
Clay GREEN FIAM	256	294	
COARSE SANDS			
WATER BEARING	294	301	135'
Clay DARK GRAY	301	302	

Date started 5-13-04 Completed 6-5-04
(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 _____ 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 Tom J. Young WWC Number 1021 Date 7-26-04

OCT 30 2018

OWRD

MAY 17 2005

STATE OF OREGON WATER SUPPLY WELL REPORT WATER RESOURCES DEPT SALEM, OREGON

CLAC 61102

WELL ID. # L 69067 START CARD # 157173

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

(1) LAND OWNER Name JOHN BASTASCH Address 29255 S.E. Folsom Rd. City Eagle CR. State ORE. Zip 97022

(9) LOCATION OF WELL by legal description: County Chackama? Latitude Longitude Township 3 S S Range 4 E E.W. WM. Section 7 NW 1/4 NW 1/4 Tax Lot 00202 Lot Block Subdivision Street Address of Well (or nearest address) Same

(2) TYPE OF WORK [X] New Well [] Deepening [] Alteration (repair/recondition) [] Abandonment

(10) STATIC WATER LEVEL: 135 ft. below land surface. Date 5-29-04 Artesian pressure lb. per square inch Date

(3) DRILL METHOD: [X] Rotary Air [] Rotary Mud [] Cable [] Auger [] Other

(11) WATER BEARING ZONES: Depth at which water was first found

(4) PROPOSED USE: [] Domestic [] Community [] Industrial [X] Irrigation [] Thermal [] Injection [] Livestock [] Other

Table with columns: From, To, Estimated Flow Rate, SWL. Includes handwritten 'RECEIVED' and 'JUN 27 2005'.

(5) BORE HOLE CONSTRUCTION: Special Construction approval [] Yes [X] No Depth of Completed Well 302 ft. Explosives used [] Yes [X] No Type Amount

HOLE SEAL table with columns: Diameter, From, To, Material, From, To, Sacks or pounds.

(12) WELL LOG: WATER RESOURCES DEPT SALEM, OREGON Ground Elevation

How was seal placed: Method [X] A [] B [X] C [] D [] E Backfill placed from ft. to ft. Material Gravel placed from ft. to ft. Size of gravel

WELL LOG table with columns: Material, From, To, SWL. Lists soil layers like SOIL BROWN, GRAVELS, CHAY GRAY STICKY, etc.

(6) CASING/LINER: Diameter From To Gauge Steel Plastic Welded Threaded Casing: 6 12 299 250 Liner: 4 1/2 262 302 26

Drive Shoe used [] Inside [X] Outside [] None Final location of shoe(s) 289'

Date started 5-13-04 Completed 6-5-04

(7) PERFORATIONS/SCREENS: [X] Perforations Method Skill Saw [] Screens Type Material

Table for Perforations/Screens with columns: From, To, Slot size, Number, Diameter, Tele/pipe size, Casing, Liner.

(unbonded) Water Well Constructor Certification:

(8) WELL TESTS: Minimum testing time is 1 hour [] Pump [] Bailer [X] Air [] Artesian Yield gal/min Drawdown Drill stem at Time

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.

Temperature of water 57° Depth Artesian Flow Found Was a water analysis done? [] Yes [] No By whom Did any strata contain water not suitable for intended use? [X] Too little [] Salty [] Muddy [] Odor [] Colored [] Other Depth of strata: 3 TO 24 Feet

WWC Number Signed 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.

WWC Number 1021 Signed Tom J. Flouze Date 7-24-04

RECEIVED

OCT 30 2018

OWRD