



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

T-13125

Application for Groundwater Registration Modification

Part 1 of 5 – Minimum Requirements Checklist

This Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.

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

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

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- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Completed Applicant Information and Signature.
- Part 4 – Completed Ground Water Registration Modification Application – Ground Water Registration Information. (Only one ground water registration per application, **unless** the ground water registrations to be modified are layered).
- Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- Groundwater registration modification fees – Amount enclosed: \$ **1,450**. (\$875.00 for a place of use change only; \$1,450 for any other change or combination).

Attachments:

- N/A Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is **not** the registration certificate holder of record. The Request for Assignment Form is available at <http://www.oregon.gov/owrd/pubs/docs/forms/assign.pdf>, or http://www.oregon.gov/owrd/pubs/docs/forms/assign_by_proof.pdf. Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) or the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.
- N/A Land Use Information Form with approval and signature (or signed land use form receipt stub). Land use form 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.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

(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 4 – Groundwater Registration Modification Map Checklist

Your Groundwater Registration Modification 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.

- 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 appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes hachuring, 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 registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.
- N/A If you are proposing a modification in place of use, show the proposed place of use with hachuring including 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 appropriation with distance and bearing or coordinates from a recognized survey corner.
- N/A If you are proposing a modification in point(s) of appropriation, 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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Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Paul and Susan Fobert		PHONE NO. 971-275-6170	ADDITIONAL CONTACT NO.
ADDRESS 18899 Fobert Rd NE			FAX NO.
CITY Hubbard	STATE OR	ZIP 97032	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 modification; and why:
We need to move a portion of this Groundwater Registration from land we will no longer be irrigating to a field not currently covered by a water right where we are planning on planting Filberts this spring.

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 (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a); **OR**

I (we) 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 (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

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I understand that prior to Department approval of the groundwater registration modification, 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 groundwater registration 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 paper: Woodburn Independent.

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

_____ Applicant Signature	_____ Print Name and title if applicable	_____ Date
_____ Applicant Signature	_____ Print Name and title if applicable	_____ Date

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, 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 Groundwater registration has been conveyed.*

Check the appropriate box, if applicable:

- Check here if the Groundwater registration proposed for modification is 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 the Groundwater registration is supplied under a water service agreement or other contract 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 Marion County Planning Division	ADDRESS 5155 Silverton Road NE	
CITY Salem	STATE Oregon	ZIP 97305

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 4 of 4 – Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

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

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	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	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 773	4	S	1	W	26	NW	NE	DLC 52	1,600 feet south and 1,900 feet west from the NE corner Section 26.
Well	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 18964	4	S	1	W	26	NW	NE	DLC 52	1,020 feet north and 230 feet west from the SE corner DLC 52.
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										
	<input type="checkbox"/> Authorized <input type="checkbox"/> Proposed										

Check all type(s) of modifications(s) proposed below (modification “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"/> Character of Use (USE) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |

Will all of the proposed changes affect the entire Groundwater registration?

- 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 registration to be changed.

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Please use and attach additional pages of Table 2 as needed.
See page 5 for instructions.

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

Table 2. Description of Modifications to Registration GR-1614 (Certificate # GR-1571)

List only the part of the registration that will be modified. For the acreage in each 1/4 1/4, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES List only that part or portion of the groundwater registration 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	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	POA(s) to be used (from Table 1)	Priority Date				
4	S	1	W	26	NE	NE	1200	DLC 60	3.0	IR	Authorized Well	6-30-1950	POU	4	S	1	W	26	NW	NE	300	DLC 52	1.6	IR	Proposed Well	6-30- 1950
4	S	1	W	26	NW	NE	1200	DLC 60	1.8	IR	Authorized Well	6-30-1950	POU	4	S	1	W	26	NE	NW	300	DLC 52	7.0	IR	Proposed Well	6-30- 1950
4	S	1	W	26	SW	NE	1200	DLC 60	1.3	IR	Authorized Well	6-30-1950														
4	S	1	W	26	SE	NE	1200	DLC 60	2.5	IR	Authorized Well	6-30-1950														
TOTAL ACRES								8.6	TOTAL ACRES								8.6									

Additional remarks: The authorized place of use for GR-1614 was re-described in Certificate 55122. This re-description was used for this modification.

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Groundwater Registration # GR-1614 (Certificate # GR-1571)

For a modification in place of use or character of use:

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

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:
NA

Pursuant to OAR 690-382-0200, any “layered” water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the “to” lands must be filed separately with a Groundwater registration modification.

For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:

- Well log(s) are attached for each well 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/)

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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.

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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 adequate information is likely to delay the processing of your modification 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	Yes	MARI 773								See Well Log MARI 773
Proposed Well	Yes	MARI 18964								See Well Log MARI 18964

STATE ENGINEER
Salem, Oregon

MAR 17 1973

Well Record

STATE WELL NO. 4/LW-26G.1
COUNTY Marion
APPLICATION NO. GR-1614

GR- 1571

OWNER: Ed Budreau

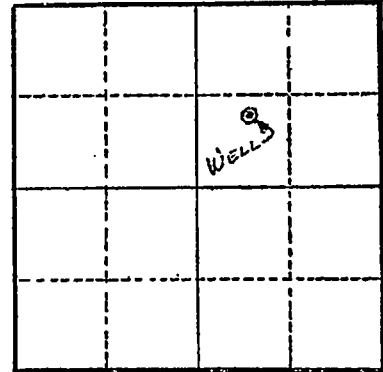
MAILING ADDRESS: Rt. 1

LOCATION OF WELL: Owner's No.

CITY AND STATE: Hubbard, Oregon

SW 1/4 NE 1/4 Sec. 26 T. 4 S., R. 1 W., W.M.

Bearing and distance from section or subdivision corner 1600' S. & 1900' W. from NE cor. Sec. 26



Section 26

Altitude at well

TYPE OF WELL: Drilled Date Constructed 1950

Depth drilled 133' Depth cased 133'

CASING RECORD:
10"

FINISH:

Perforated

AQUIFERS:

Gravel & sand

WATER LEVEL:

?

PUMPING EQUIPMENT: Type Jacuzzi turbine H.P. 30
Capacity 500 G.P.M.

WELL TESTS:

Drawdown 95 ft. after 650 hours G.P.M.

Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F. 19

SOURCE OF INFORMATION GR Record

DRILLER or DIGGER Coleman

ADDITIONAL DATA:

Log N.A. Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

Irrigation of 48 acres.

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

MARI
18964

45/1W/26AC
 (START CARD) # 47990

(1) OWNER: Well Number _____
 Name James Budreau
 Address 13802 Scholl Rd NE
 City Hubbard State OR Zip 97032

(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 222 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE		SEAL		Amount	
Diameter	From To	Material	From To	sacks or pounds	
14	0 30	Cement	0 3	21 + bent.	
10	30 222				

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: 10	1	200	.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"/>

Final location of shoe(s) 200 ft

(7) PERFORATIONS/SCREENS:
 Perforations Method Mills Knife
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
103	109	3/8 x 2 1/2	96			<input checked="" type="checkbox"/>	<input type="checkbox"/>
149	159	3/8 x 2 1/2	160			<input checked="" type="checkbox"/>	<input type="checkbox"/>
183	189	3/8 x 2 1/2	96			<input checked="" type="checkbox"/>	<input type="checkbox"/>

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

Yield gal/min	Drawdown	Drill stem at	Time
75	0		1 hr.

Temperature of Water 56 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 Marion Latitude _____ Longitude _____
 Township 4-S N or S, Range 1-W E or W, WM. _____
 Section 26 SW 1/4 NE 1/4
 Tax Lot 00800 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) 19291 Fabert Rd. NE. Hubbard OR 97032

(10) STATIC WATER LEVEL:
44 ft. below land surface. Date 4-5-94
 Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
 Depth at which water was first found 76

From	To	Estimated Flow Rate	SWL
76	77	Cased off	44
98	109	100 +	44
149	168	100 +	44
168	189	50 +	44

(12) WELL LOG: RECEIVED
 Ground elevation FEB 19 2019

Material	From	To	SWL
Soil	0	3	
Brown clay	3	19	
Brown Sandy clay	19	27	
Dry Packed Sand	27	30	
Brown Sandy clay	30	37	
Brown Silty Sand	37	63	
Brown Sandy clay	63	74	
Course brown Sand & clay	74	76	
Loose water Sand	76	77	44
Blue Sandy clay	77	85	
Gray Sandy clay	85	94	
Sand water	94	98	
Sand + gravel (wood)	98	106	44
Gravel water	106	109	
Blue sandy clay	109	128	
Tight clay & gravel	128	149	44
Tight Sand + gravel	149	159	44
Gray Sandy clay	159	168	
Blue green Sandy clay	168	183	44
Gray clay w/ coarse Sand	183	189	44
Sticky blue clay	189	222	

Date started 3-16-94 Completed 4-5-94

(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 well construction standards. Materials used and information reported above are true to my best knowledge and belief.
 Signed William Smith WWC Number 175
 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 well construction standards. This report is true to the best of my knowledge and belief.
 Signed Floyd Depp WWC Number 1273
 Date 4-7-94