



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.

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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 the Permits here: Permit G-17001 (Application G-17461)
 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 <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). 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 Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. 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 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(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"/> Land Use Form not enclosed or incomplete <input type="checkbox"/> Additional signature(s) required Other/Explanation _____ Staff: _____ 503-986-0 _____	<input type="checkbox"/> Map not included or incomplete <input type="checkbox"/> Part _____ is incomplete Date: ____ / ____ / ____
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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.

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- 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 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°).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Willamette Egg Farm – Canby (A Michael Foods, Inc. Company)			PHONE NO. (952) 258-4822	ADDITIONAL CONTACT NO. (319) 327-1234
ADDRESS 31348 S. Highway 170			FAX NO.	
CITY Canby	STATE OR	ZIP 97013	E-MAIL Kathryn.Miller@michaelfood.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.				

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

AGENT/BUSINESS NAME Robert Annear Geosyntec Consultants			PHONE NO. (971) 271-5906	ADDITIONAL CONTACT NO.
ADDRESS 920 SW Sixth Avenue, Suite 600			FAX NO.	
CITY Portland	STATE OR	ZIP 97204	E-MAIL RAnnear@geosyntec.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:
We are requesting authorization to add Well 4 (CLAC 2041) to the permit.
 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)

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Is the applicant the permit holder of record? Yes No

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If NO, include either:

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- 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.

Has the Completion ("C") Date of the permit(s) in this application expired? Yes No

If YES, this application will not be accepted by the Department.

If NO, what are the completion dates of the permit(s)? 10/1/2023

- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing of this Permit Amendment Application if the completion date of the permit expires within 6 months of the date of filing this application.

By my signature below, I confirm that I understand:

- 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: Canby Herald

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



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 NA	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 NA	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 County	ADDRESS 150 Beavercreek Road	
CITY Oregon City	STATE OR	ZIP 97045

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Applicant Signature

Dann Barnard; Plant Operations Manager
Print Name (and Title if applicable)

5-31-19
Date

Applicant Signature

Print Name (and Title if applicable)

Date

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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-17001

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	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 2430	5	S	1	E	10	SW	NW	900	1890 ft S and 380 ft E from NW cor. Sec. 10
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	CLAC 2431	5	S	1	E	10	SW	NW	900	1780 ft S and 280 ft E from NW cor. Sec. 10
Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NA – NOT DRILLED	5	S	1	E	10	SW	NW	900	1380 ft S and 1230 ft E from NW cor. Sec. 10
Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	CLAC 2041	5	S	1	E	9	SE	NE	300	1630 ft S and 70 ft W from NE cor. Sec. 9

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"/> 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) |

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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

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 # G-17001

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 (if applicable)	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 (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																								
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	S	9	E	15	NW	NW	100	1	10.0	POD #5	
"	"	"	"	"	"	"	"	"	EXAMPLE	"		"	2	S	9	E	15	SW	NW	200		5.0	POD #6	
												APOA	5	S	1	E	9	SE	NE	300	--	NA	WELLS 1, 2, 3 & 4	4/19/2011
													5	S	1	E	10	NW	NW	900	--	NA	WELLS 1, 2, 3 & 4	4/19/2011
													5	S	1	E	10	SW	NW	900	--	NA	WELLS 1, 2, 3 & 4	4/19/2011
													5	S	1	E	10	SE	NW	900	--	NA	WELLS 1, 2, 3 & 4	4/19/2011
TOTAL ACRES											TOTAL ACRES										NA			

Additional remarks: **The intent is to be able to appropriate the 0.56 cfs of groundwater from any combination of the four wells.**

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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: T-11366

 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://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.

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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 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 CLAC 2430	--								
Well 2	Yes, see CLAC 2431	--								
Well 3	No	--	265 ft	10 in	0 to 260	0 to 150	150 to 260	NA	Sand & Gravel	
Well 4	Yes, see CLAC 2041	--								

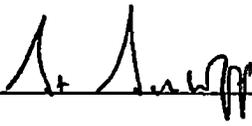


Memorandum to File: Delegation of Authorized Representative (DAR)
Michael Foods, Inc. & Bob Evans Farms

RE: Corporate Policy DAR for submittals under 40 CFR Part 122

This document stands as the official corporate policy regarding signatory authority for operating facilities at Michael Foods, Inc. (MFI) and Bob Evans Farms, Inc. (BEF). Under the company's corporate structure, the following positions, and the individual(s) in those positions, have signatory authority for permit applications and information requested by the EPA, State Agencies, and other Local Agencies related to the operation of an operating facility for which the position is responsible: Director of Operations or Plant Manager. These positions within the corporate structure are authorized to make management decisions which govern the operation of the regulated facility and have the explicit or implicit duty of making major capital investment recommendations, initiate or direct other comprehensive measures to assure long term environmental compliance with environmental laws and regulations, and ensure the necessary systems are established or actions taken to gather complete and accurate information for permit application requirements. This document formalizes that assignment and delegation to the above positions and hereby authorizes the individuals in those positions to sign documents regulated under 40 CFR Part 122.

This information includes but is not limited to: applications, Discharge Monitoring Reports (DMRs), compliance certifications, inspections, and reports or other submittals required by the permit or the rules under the Clean Water Act or similar state or local programs.

Signature: 
Authorized by: Steven Schonhoff

Date: 3/22/19
Senior Vice President of Integrated Supply Chain
Title: for Michael Foods, INC. & Bob Evans Farms, Inc.

For more information, refer to 40 CFR 122.22

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CLARK Gerald E * WRD

From: Dann Barnard <dann.barnard@willametteegg.com>
Sent: Friday, May 31, 2019 5:35 AM
To: CLARK Gerald E * WRD
Subject: Willamette Egg Farms
Attachments: 2019_05_30_Canby Plan Review.pdf

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Mr. Clark—

I was in to see you, yesterday, but did not have the County Land Use Form signed, yet. I now have that along with the completed Permit Amendment Application packet and will be coming back in to submit it this morning. I intended to bring along a copy of our Plan Review packet as submitted to the OR Health Authority in case you needed to see it, but ran out of printer paper at home so I have attached it to this email.

I will be at your office shortly before 8:30 am.

Dann Barnard
Plant Operations Manager
Willamette Egg Farms
31348 South Highway 170
Canby, OR 97013

dann.barnard@willametteegg.com

(503) 651-6919—Direct
(503) 651-0000—Main Office
(503) 651-2095—Fax

This message and any attachments are intended only for the addressee(s) and may contain privileged or confidential information. Any unauthorized disclosure is strictly prohibited. If you have received this message in error, please notify us immediately so that we may correct our internal records. Please then permanently delete the original message including any attachments and any copies that may have been made.

**MICHAEL
FOODS** INC.

301 Carlson Parkway, Suite 400
Minnetonka, MN 55305

April 30, 2019

Attn: Plan Review
800 NE Oregon St, Ste 460
Portland, OR 97232-2162

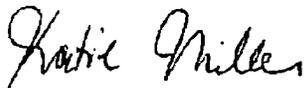
Re: Willamette Egg Farms
31348 S. Highway 170
Canby, OR 97013

To Whom It May Concern:

Please find enclosed the supporting documents for an OHA Plan Review for Willamette Egg Farms, located at 31348 S. Hwy 170, Canby. The site proposes to convert the use of the existing Well 4 (CLAC 2041), permitted under T-11366, from irrigation-only to dual-use for year-round industrial processes and irrigation.

If you have questions regarding the content of this submittal, please do not hesitate to contact me at kathryn.miller@michaelfoods.com, or by phone at (952)-258-4822.

Sincerely,



Kathryn Miller
Environmental Specialist
Michael Foods, Inc.

Cc: Dann Barnard, Willamette Egg Farms (a Michael Foods, INC. company)

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NOTICE TO WATER WELL CONTRACTOR

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

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

WATER WELL REPORT

STATE OF OREGON (Please type or print) (Do not write above this line)

State Well No. 5/1-9H
State Permit No. EE
Rights transferred to T-11366

G 5528
G-4419

(1) OWNER:

Name Tom Dybvad
Address Rt. 2, Box 163
Canby, Oregon

CLAC
02041

(11) LOCATION OF WELL:

County Clackamas Driller's well number
SE $\frac{1}{4}$ NW $\frac{1}{4}$ Section 10 T. 5S R. 1E W.M.

Bearing and distance from section or subdivision corner

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Cable Dug
Driven Jetted Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

(12) WELL LOG:

Diameter of well below casing
Depth drilled 538 ft. Depth of completed well 538 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 as drilling proceeds. Note drilling rates.

CASING INSTALLED: Threaded Welded
" Diam. from 0 ft. to 446 ft. Gage .250
12 " Diam. from 446 ft. to 486 ft. Gage .375
10 " Diam. from 483 ft. to 538 ft. Gage 10 Ga.

PERFORATIONS:

Perforated? Yes No.
Type of perforator used 12 in. Mills k. 10 in. tp
Size of perforations 1/8 in. by 6 in. 10 in. tp
260 perforations from 486 ft. to 536 ft.
48 perforations from 114 ft. to 118 ft.
32 perforations from 189 ft. to 192 ft.
40 perforations from 218 ft. to 222 ft.
40 perforations from 269 ft. to 273 ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name
Type Model No.
Diam. Slot size Set from ft. to ft.
Diam. Slot size Set from ft. to ft.

(8) WATER LEVEL: Completed well.

level 39 ft. below land surface Date 11/9
Static pressure lbs. per square inch Date

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom?
160 gal./min. with 32 ft. drawdown after 1/2 hrs.
320 " " 53 " " 2 " "
400 " " 69 " " 4 1/2 " "
580 " " 111 " " 10 1/2 " "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m. Date
Temperature of water 56 Was a chemical analysis made? Yes No

(10) CONSTRUCTION:

Well seal—Material used Bentonite clay
Depth of seal 34 ft.
Diameter of well bore to bottom of seal 16 in.
Were any loose strata cemented off? Yes No Depth
Was a drive shoe used? Yes No
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:
Gravel placed from ft. to ft.

MATERIAL	From	To	SWL
Top soil, brown	0	2	
Clay, tan	2	12	
Soft silty clay	12	17	
Clay, blue	17	40	
Cemented gravel	40	54	
Clay, tan	54	57	
Gravel	57	62	21
Clay, brown	62	68	
Gravel, cemented	68	73	21
Clay, brown	73	92	
Gravel	92	96	21
Clay, blue	96	110	
Clay, brown	110	114	
Coarse brown sand & gravel	114	118	21
Clay, blue	118	146	
Clay, brown	146	150	
Clay, grey	150	156	
Clay, olive green	156	161	
Clay, grey, sticky	161	174	
Clay, blue	174	187	
Clay, grey, gritty	187	191	

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Work started Aug. 21 1967 Completed Nov. 9 1967
Date well drilling machine moved off of well Nov. 9 1967

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] C. G. Westerberg Date 11/15, 1967
(Drilling Machine Operator)

Drilling Machine Operator's License No. 86

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 C. G. Westerberg
(Person, firm or corporation) (Type or print)

Address Rt. 1, Box 151, Mulino, Oregon
13196

[Signed] C. G. Westerberg
(Water Well Contractor)

Contractor's License No. 86 Date 11/15, 1967

Water Right Certificates. The affidavits further stated they had obtained a different source of water for primary irrigation of these lands and requested the entire water rights be diminished from rights for primary irrigation to rights for supplemental irrigation of the lands, upon approval of Application G-17461.

4. A letter received October 11, 2012, from the applicant, however, withdrew the request to diminish these rights.
5. The portion of the first right to be transferred is as follows:

Certificate: 42788 in the name of TALMER DYBVAD (perfected under Permit G-4046)
Use: IRRIGATION of 66.0 ACRES
Priority Date: MAY 29, 1968
Rate: 0.826 CUBIC FOOT PER SECOND
Limit/Duty: The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated, and shall be further limited to a diversion of not to exceed 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year.
Source: A WELL, tributary of BEAR CREEK (WILLAMETTE RIVER)

Authorized Point of Appropriation:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
5 S	1 E	WM	9	SE NE	1680 FEET SOUTH AND 40 FEET WEST FROM THE NE CORNER OF SECTION 9

Authorized Place of Use:

IRRIGATION						
Twp	Rng	Mer	Sec	Q-Q	Acres	Type of Change
5 S	1 E	WM	9	NE NE	12.8	APOA
5 S	1 E	WM	9	SE NE	16.6	APOA
5 S	1 E	WM	9	SE NE	2.6	APOA/POU
5 S	1 E	WM	10	NW NW	17.7	APOA
5 S	1 E	WM	10	NW NW	2.1	APOA/POU
5 S	1 E	WM	10	SW NW	6.6	APOA
5 S	1 E	WM	10	SW NW	7.6	APOA/POU
Total					66.0	

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6. Transfer Application T-11366 proposes additional points of appropriation approximately 1300 feet from the existing point of appropriation:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
5 S	1 E	WM	10	SW NW	1780 FEET SOUTH AND 280 FEET EAST FROM THE NW CORNER OF SECTION 10
5 S	1 E	WM	10	SW NW	1380 FEET SOUTH AND 1230 FEET EAST FROM THE NW CORNER OF SECTION 10
5 S	1 E	WM	10	SW NW	1890 FEET SOUTH AND 380 FEET EAST FROM THE NW CORNER OF SECTION 10

7. Transfer Application T-11366 also proposes to change the place of use of 12.3 acres of the right to:

IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
5 S	1 E	WM	10	SW NW	2.8
5 S	1 E	WM	10	SE NW	9.5
Total					12.3

8. The second right to be transferred is as follows:

Certificate: 44577 in the name of WILLAMETTE EGG FARM (perfected under Permit G-5414)

Use: IRRIGATION of 28.4 ACRES

Priority Date: MAY 27, 1971

Rate: 0.36 CUBIC FOOT PER SECOND

Limit/Duty: The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated, and shall be further limited to a diversion of not to exceed 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year.

Source: A WELL, a tributary of the BEAR CREEK OVERFLOW CHANNEL

Authorized Point of Appropriation:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
5 S	1 E	WM	9	SE NE	1680 FEET SOUTH AND 40 FEET WEST FROM THE NE CORNER OF SECTION 9

Authorized Place of Use:

IRRIGATION						
Twp	Rng	Mer	Sec	Q-Q	Acres	Type of Change
5 S	1 E	WM	10	NW NW	9.3	APOA
5 S	1 E	WM	10	NW NW	2.3	APOA/POU
5 S	1 E	WM	10	SW NW	12.5	APOA/POU
5 S	1 E	WM	10	SW NW	4.3	APOA
Total					28.4	

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9. Transfer Application T-11366 proposes additional points of appropriation approximately 1300 feet from the existing point of appropriation:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
5 S	1 E	WM	10	SW NW	1890 FEET SOUTH AND 380 FEET EAST FROM THE NW CORNER OF SECTION 10
5 S	1 E	WM	10	SW NW	1780 FEET SOUTH AND 280 FEET EAST FROM THE NW CORNER OF SECTION 10
5 S	1 E	WM	10	SW NW	1380 FEET SOUTH AND 1230 FEET EAST FROM THE NW CORNER OF SECTION 10

10. Transfer Application T-11366 also proposes to change the place of use of 14.8 acres of the right to:

IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
5 S	1 E	WM	10	SE NW	14.8

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11. Notice of the application for transfer was published on March 13, 2012, pursuant to OAR 690-380-4000. No comments were filed in response to the notice.
12. On July 31, 2012, the Department sent a copy of the draft Preliminary Determination proposing to approve Transfer Application T-11366 to the applicant. The draft Preliminary Determination cover letter set forth a deadline of August 31, 2012, for the applicant to respond. The applicant requested that the Department proceed with issuance of a Preliminary Determination, provided the necessary information to demonstrate that the applicant is authorized to pursue the transfer, and requested a completion date of October 1, 2015.
13. On August 13, 2012, a Preliminary Determination was issued, incorporating the completion date of October 1, 2015.
14. On September 19, 2012, a revised Preliminary Determination was issued which incorporated the September 11, 2012, request for diminution to supplemental irrigation.
15. On October 11, 2012, Willamette Egg Farms submitted a letter requesting that the affidavits submitted on September 11, 2012, be rescinded and withdrawn.
16. On October 23, 2012, the Department issued a second revised Preliminary Determination proposing to approve Transfer Application T-11366 and sent a copy to the applicant. Additionally, notice of the Preliminary Determination for the transfer application was published on the Department's weekly notice on August 21, and on October 30, 2012, pursuant to ORS 540.520 and OAR 690-380-4020. No protests were filed in response to the notices.

Transfer Review Criteria (OAR 690-380-4010)

17. Water has been used within the last five years according to the terms and conditions of the rights. There is no information in the record that would demonstrate that the rights are subject to forfeiture under ORS 540.610.
18. A pump, pipeline, and sprinkler system sufficient to use the full amount of water allowed under the existing rights were present within the five-year period prior to submittal of Transfer Application T-11366.
19. The proposed change would not result in enlargement of the rights.
20. The proposed change would not result in injury to other water rights.

Partial Cancellation of a Water Right

21. On March 1, 2012, an affidavit certifying that a portion of a water right has been abandoned and requesting cancellation of the right was received from Smyrna United Church of Christ.

The right to be cancelled is as follows:

Certificate: 42788 in the name of TALMER DYBVAD (perfected under Permit G-4046)

Use: IRRIGATION of 0.3 ACRE

Priority Date: MAY 29, 1968

Rate: 0.004 CUBIC FOOT PER SECOND

Limit/Duty: The amount of water used for irrigation, together with the amount secured under any other right existing for the same lands, shall be limited to ONE-EIGHTIETH of one cubic foot per second per acre, or its equivalent for each acre irrigated, and shall be further limited to a diversion of not to exceed 2.5 acre-feet per acre for each acre irrigated during the irrigation season of each year.

Source: A WELL, tributary of BEAR CREEK (WILLAMETTE RIVER)

Authorized Point of Diversion:

Twp	Rng	Mer	Sec	Q-Q	Measured Distances
5 S	1 E	WM	9	SE NE	1780 FEET SOUTH AND 40 FEET WEST FROM THE NE CORNER OF SECTION 9

Authorized Place of Use to be Cancelled:

IRRIGATION					
Twp	Rng	Mer	Sec	Q-Q	Acres
5 S	1 E	WM	9	NE NE	0.3

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Conclusions of Law

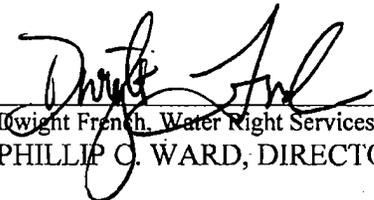
The additional points of appropriation and changes in places of use proposed in Transfer Application T-11366 are consistent with the requirements of ORS 537.705 and 540.505 to 540.580 and OAR 690-380-5000, and the abandoned right should be cancelled.

Now, therefore, it is ORDERED:

1. The additional points of appropriation and changes in places of use proposed in Transfer Application T-11366 are approved. The portion of the right that has been abandoned is cancelled.
2. The right to the use of the water is restricted to beneficial use at the place of use described, and is subject to all other conditions and limitations contained in Certificate 42788 and 44577 and any related decree.
3. Water right certificates 42788 and 44577 are cancelled.

4. The quantity of water diverted at the additional points of appropriation, together with that diverted at the original point of appropriation, shall not exceed the quantity of water lawfully available at the original point of appropriation.
5. Water use measurement conditions:
 - a. Before water use may begin under this order, the water user shall install a totalizing flow meter, or, with prior approval of the Director, another suitable measuring device at each point of appropriation (new and existing).
 - b. The water user shall maintain the meters or measuring devices in good working order.
 - c. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices is located within a private structure, the Watermaster shall request access upon reasonable notice.
6. Water shall be acquired from the same aquifer (water source) as the original point of appropriation.
7. The former places of use of the transferred rights shall no longer receive water under the rights.
8. Full beneficial use of the water shall be made, consistent with the terms of this order, on or before **October 1, 2015**. A Claim of Beneficial Use prepared by a Certified Water Right Examiner shall be submitted by the applicant to the Department within one year after the deadline for completion of the changes and full beneficial use of the water.
9. After satisfactory proof of beneficial use is received, new certificates confirming the rights transferred will be issued.

Dated at Salem, Oregon this 6 day of December, 2012.


Dwight French, Water Right Services Administrator, for
PHILLIP C. WARD, DIRECTOR

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Mailing date: DEC 13 2012

Oregon Water Resources Department
PUMP TEST FORM COVER SHEET

Well Owner:

Name: Willamette Egg Farm
 Address: 31348 S Hwy 170
 County: Clackamas
 City: Canby State: OR Zip: 97013
 Original owner (from well log): Tom Dybvad

Well Location:

Township: 5 S Range: 1 E
 Section: 9 $\frac{1}{4}$: SE $\frac{1}{16}$: NE $\frac{1}{64}$:
 Well depth: 538.0 Date drilled: 11-9-67
 Owners well no. (if any): Clack02041
 POD ID:

Water Right Information:

Application: _____ Permit: _____ Certificate: _____
 Is this well listed on more than one water right? Yes If yes, list additional water rights below:
 Application: _____ Permit: _____ Certificate: _____
 Application: _____ Permit: _____ Certificate: _____

Pump Test:

Test Conducted by: Steven N. Stadel Well Owner? Yes
 Company: Westerberg Drilling Inc
 Address: PO Box 1228 Date of Test: 10/25/2018
 City: Molalla State: OR Zip: 97038
 Daytime phone: 503-829-2526

Method of discharge measurement (see our brochure for more information): Flow meter
 Method of water-level measurement (pick one or enter other method used): Electric tape
 Length of air line (if used): _____

Pump type (pick one or enter other method used): Submersible 40 hp - well performance test
 Was the pump test conducted during normal use of the well? Yes Note: OWRD required test

Are you aware of any wells, other than domestic or stock wells, pumping within 1000 feet of the tested well during the test or within 24 hours prior to the test? Yes Note: no
 If yes, give approximate distances to each and approximate pumping rate of each. If possible, indicate if they were turned on or off during the test: _____

Is there a lake, stream or other surface water body within $\frac{1}{4}$ mile of the tested well? Yes If yes, give approximate distance from the well and approximate elevation difference between the surface water and the well head. Approx. distance: n/a ft Approx. elevation difference: n/a ft
 Well elevation is n/a surface water body.

Description of measuring point (e.g. top port of 1 inch port pipe, west side) _____
Vent on top of well seal

Measuring point distance above land surface 1.00 feet.
OWRD Static water level measurements: (A minimum of three measurements are required in the hour before pumping begins at no less than 20 minutes apart):

Time	Depth to water below meas. point	Depth to water below land surface
<u>7:10 am</u>	<u>89.11</u>	<u>88.11</u>
<u>7:30 am</u>	<u>89.11</u>	<u>88.11</u>
<u>7:50 am</u>	<u>89.11</u>	<u>88.11</u>

Discharge measurements: (A discharge measurement is required at the start of pumping and at least once an hour during the test; additional measurements should be noted on the Pump Test Data Sheet):

Time	Discharge Rate	Discharge Units (e.g. gpm, cfs, etc)
<u>8:00 am</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>
<u>9:00 am</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>
<u>10:00 am</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>
<u>11:00 am</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>
<u>12:00 pm</u>	<u>400.00</u>	<u>gpm (gallons per minute)</u>

Time pump turned on: _____ Date 10/25/2018 Time 8:00 am
 Time pump turned off: _____ Date 10/25/2018 Time 4:00 pm
 Total pumping time: 8 hours 0 minutes

Note: Well must be idle for at least 16 hours prior to the test.

Additional forms can be obtained from our web site at <http://www.wrd.state.or.us>

OWRD 2/9/2000

Required Signature: Steven N. Stadel

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PUMP TEST DATA SHEET

Application: _____ Permit: T-11366 Certificate: 42788 Pod Id: _____

All water-level measurements must either be in feet and inches, or feet and decimal fractions.

Drawdown Data

Recovery Data

Date	Time	Time Since Pump Started (minutes)	Depth to Water Below Measuring Pt	Depth to Water Below Land Surface	Comments	Date	Time	Time Since Pump Stopped (minutes)	Depth to Water Below Measuring Pt	Depth to Water Below Land Surface	Comments
10-25-18	8:00	0	89.11		start pump	10-25-18	4:00	0			stop pump
		2	103.5		400			2	127.1		
		4	114.4		400			4	119.6		
		6	117.1.5		400			6	117.3.5		
		8	118.7		400			8	115.2.75		
		10	119.4		400			10	113.7		
		15	122.1.5		400			15	110.9		
		20	123.10		400			20	109.1		
		25	124.10		400			25	107.10		
		30	125.8.5		400			30	106.8.75		
		45	127.8		400			45	104.6.25		
	9:00	1	129.6.5		400		5:00	1	103.5		
		1.25	130.3		400			1.25	102.5		
		1.5	131.5		400			1.5	101.2		
		1.75	133.3		400			1.75	100.5.25		
	10:00	2	134.7		400		6:00	2	99.9.75		
		2.25	135.8		400			2.25	99.4		
		2.5	136.4.5		400			2.5	98.11		
		2.75	137.5		400			2.75	98.7.5		
	11:00	3	137.5		400		7:00	3	98.2.5		
		3.25	137.11.5		400			3.25	97.9		
		3.5	138.5		400			3.5	97.5		
		3.75	138.9		400			3.75	97.3		
	12:00	4	139.5		400		8:00	4	96.11.5		
		4.25	139.5		400			4.25	96.8		
		4.5	139.10		400			4.5	96.5		
		4.75	140.3		400			4.75	96.2		
	1:00	5	140.6.5		400		9:00	5	95.10.5		
		5.25	140.8		400			5.25	95.7.25		
		5.5	140.11		400			5.5	95.5		
		5.75	141.1		400			5.75	95.3.75		90% recovery
	2:00	6	141.2.5		400		10:00	6			
		6.25	141.5.5		400						
		6.5	141.7		400						
		6.75	141.9.5		400						
	3:00	7	142.7.5		400						
		7.25	142.3.5		400						
		7.50	142.4.5		400						
		7.75	142.5		400						
	4:00	8	142.6.5		pump off						

Additional forms can be obtained from our web site at: <http://www.wrd.state.or.us>

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STATE OF OREGON

COUNTY OF CLACKAMAS

PERMIT TO APPROPRIATE THE PUBLIC WATERS

THIS PERMIT IS HEREBY ISSUED TO

WILLAMETTE EGG FARMS
31348 S HWY 170
CANBY, OR 97013

The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-17461

SOURCE OF WATER: WELL 1 (CLAC 2430), WELL 2 (CLAC 2431), AND WELL 3 IN
BEAR CREEK BASIN & Well 4

PURPOSE OR USE: INDUSTRIAL USES

MAXIMUM RATE: 0.56 CUBIC FOOT PER SECOND

PERIOD OF USE: YEAR ROUND

DATE OF PRIORITY: APRIL 19, 2011

WELL LOCATIONS: See T-11366 for location to be added to this permit (G17001)

WELL 1 (CLAC 2430): SW $\frac{1}{4}$ NW $\frac{1}{4}$, SECTION 10, T5S, R1E, W.M.; 1890
FEET SOUTH AND 380 FEET EAST FROM NW CORNER, SECTION 10

WELL 2 (CLAC 2431): SW $\frac{1}{4}$ NW $\frac{1}{4}$, SECTION 10, T5S, R1E, W.M.; 1780
FEET SOUTH AND 280 FEET EAST FROM NW CORNER, SECTION 10

WELL 3: SW $\frac{1}{4}$ NW $\frac{1}{4}$, SECTION 10, T5S, R1E, W.M.; 1380 FEET SOUTH AND
1230 FEET EAST FROM NW CORNER, SECTION 10

THE PLACE OF USE IS LOCATED AS FOLLOWS:

SE $\frac{1}{4}$ NE $\frac{1}{4}$
SECTION 9

NW $\frac{1}{4}$ NW $\frac{1}{4}$
SW $\frac{1}{4}$ NW $\frac{1}{4}$
SE $\frac{1}{4}$ NW $\frac{1}{4}$
SECTION 10

TOWNSHIP 5 SOUTH, RANGE 1 EAST, W.M.

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Measurement, recording and reporting conditions:

- A. Before water use may begin under this permit, the permittee shall install a totalizing flow meter or other suitable measuring device as approved by the Director at each point of appropriation. The permittee shall maintain the meter or measuring device in good working order.
- B. The permittee shall keep a complete record of the amount of water diverted each month, and shall submit a report which includes the recorded water-use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the permittee to report general water-use information, including the place and nature of use of water under the permit.
- C. The permittee shall allow the watermaster access to the meter or measuring device; provided however, where any meter or measuring device is located within a private structure, the watermaster shall request access upon reasonable notice.
- D. The Director may provide an opportunity for the permittee to submit alternative measuring and reporting procedures for review and approval.

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To monitor the effect of water use from the well(s) authorized under this permit, the Department requires the water user to obtain, from a qualified individual (see below), and report annual static water level measurements. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement.

Measurements must be made according to the following schedule:

Before Use of Water Takes Place

Initial and Annual Measurements

The Department requires the permittee to report an initial water level measurement in the month specified above once well construction is complete and annually thereafter until use of water begins; and

After Use of Water has Begun

Seven Consecutive Annual Measurements

Following the first year of water use, the user shall report seven consecutive annual static water level measurements. The first of these seven annual measurements will establish the reference level against which future annual measurements will be compared. Based on an analysis of the data collected, the Director may require the user to obtain and report additional annual static water level

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measurements beyond the seven year minimum reporting period. The additional measurements may be required in a different month. If the measurement requirement is stopped, the Director may restart it at any time.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board and be submitted to the Department on forms provided by the Department. The Department requires the individual performing the measurement to:

- A. Identify each well with its associated measurement; and
- B. Measure and report water levels to the nearest tenth of a foot as depth-to-water below ground surface; and
- C. Specify the method used to obtain each well measurement; and
- D. Certify the accuracy of all measurements and calculations reported to the Department.

The water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s) if any of the following events occur:

- A. Annual water level measurements reveal an average water level decline of three or more feet per year for five consecutive years; or
- B. Annual water level measurements reveal a water level decline of 15 or more feet in fewer than five consecutive years; or
- C. Annual water level measurements reveal a water level decline of 25 or more feet; or
- D. Hydraulic interference leads to a decline of 25 or more feet in any neighboring well with senior priority.

The period of non-use or restricted use shall continue until the water level rises above the decline level which triggered the action or until the Department determines, based on the permittee's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this permit. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

Well 1 (CLAC 2430), Well 2 (CLAC 2431), and Well 3 shall allow ground water only from the alluvial ground water reservoir.

Well 3 shall allow ground water from no shallower than 100 feet below land surface.

Application G-17461 Water Resources Department PERMIT G-17001

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Prior to using water from any well listed on this permit, the permittee shall ensure that the well has been assigned an OWRD Well Identification Number (Well ID tag), which shall be permanently attached to the well. The Well ID shall be used as a reference in any correspondence regarding the well, including any reports of water use, water level, or pump test data.

STANDARD CONDITIONS

Failure to comply with any of the provisions of this permit may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the permit.

If the number, location, source, or construction of any well deviates from that proposed in the permit application or required by permit conditions, this permit may be subject to cancellation, unless the Department authorizes the change in writing.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this permit, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The well(s) shall be constructed in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine water level elevation in the well at all times.

If the riparian area is disturbed in the process of developing a point of appropriation, the permittee shall be responsible for restoration and enhancement of such riparian area in accordance with ODFW's Fish and Wildlife Habitat Mitigation Policy OAR 635-415. For purposes of mitigation, the ODFW Fish and Wildlife Habitat Mitigation Goals and Standards, OAR 635-415, shall be followed.

The use may be restricted if the quality of downstream waters decreases to the point that those waters no longer meet state or federal water quality standards due to reduced flows.

Where two or more water users agree among themselves as to the manner of rotation in the use of water and such agreement is placed in writing and filed by such water users with the watermaster, and such rotation system does not infringe upon such prior rights of any water user not a party to such rotation plan, the watermaster shall distribute the water according to such agreement.

Prior to receiving a certificate of water right, the permit holder shall submit to the Water Resources Department the results of a pump test meeting the Department's standards for each point of appropriation (well), unless an exemption has been obtained in writing under OAR 690-217. The Director may require water-level or pump-test data every ten years thereafter.

This permit is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

Completion of construction and application of the water shall be made within five years of the date of permit issuance. If beneficial use of permitted water has not been made before this date, the permittee may submit an application for extension of time, which may be approved based upon the merit of the application.

Within one year after making beneficial use of water, the permittee shall submit a claim of beneficial use, which includes a map and report, prepared by a Certified Water Rights Examiner.

Issued January 31, 2013



E. Timothy Wallin, Water Rights Program Manager
for Phillip C. Ward, Director

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BSK Associates Vancouver
 2517 E. Evergreen Blvd.
 Vancouver, WA98661
 360-750-0055 (Main)
 360-750-0057 (FAX)



Oregon Drinking Water Program Chemical Analysis Report

Water System Information		Sample Information	
PWS ID:		Collection Date: 03/26/2019	Report Date: 04/09/2019
PWS Name: Willamette Egg Farms		Source ID (EP-A, EP-B, etc.):	
PWS Address:		Sample Type: Other	
		Sample/Lab ID: V9C0430-01	
Location Information: Irrigation Well - West of Hwy 170 across from Plant			

All compliance samples to be taken at Entry Point (EP). This is after treatment (if any) and prior to first user.
 Analytical results meet all NELAC requirements unless otherwise noted.
 *separate forms needed for each analyzing lab

Lab PERFORMING Analysis* - BSK Associates Vancouver WA100008

OR DW - Inorganic Compounds

Analyte Code	Analyte	MCL	Result	Limit of Quantitation	Test Method / Analyst
1025	Fluoride	4 mg/L	ND	0.20 mg/L	EPA 300.0 / TAN
1038	NO3-N + NO2-N	N/A	ND	0.50 mg/L	EPA 300.0 / TAN
1040	Nitrate as N	10 mg/L	ND	0.50 mg/L	EPA 300.0 / TAN
1041	Nitrite as N	1 mg/L	ND	0.10 mg/L	EPA 300.0 / TAN

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Reviewed by

Debra Karlsson, Project Manager

13196



BSK Associates Vancouver
 2517 E. Evergreen Blvd.
 Vancouver, WA98661
 360-750-0055 (Main)
 360-750-0057 (FAX)



Oregon Drinking Water Program Chemical Analysis Report

Water System Information		Sample Information	
PWS ID:		Collection Date: 03/26/2019	Report Date: 04/09/2019
PWS Name: Willamette Egg Farms		Source ID (EP-A, EP-B, etc.):	
PWS Address:		Sample Type: Other	
		Sample/Lab ID: V9C0430-01	
Location Information: Irrigation Well - West of Hwy 170 across from Plant			

All compliance samples to be taken at Entry Point (EP). This is after treatment (if any) and prior to first user.
 Analytical results meet all NELAC requirements unless otherwise noted.
 *separate forms needed for each analyzing lab

Lab PERFORMING Analysis* - BSK Associates Laboratory Fresno 4021

OR DW - Inorganic Compounds

Analyte Code	Analyte	MCL	Result	Limit of Quantitation	Test Method / Analyst
1074	Antimony	0.006 mg/L	ND	0.0030 mg/L	EPA 200.8 / MAS
1005	Arsenic	0.01 mg/L	0.0051 mg/L	0.0014 mg/L	EPA 200.8 / MAS
1010	Barium	2 mg/L	ND	0.10 mg/L	EPA 200.8 / MAS
1075	Beryllium	0.004 mg/L	ND	0.00030 mg/L	EPA 200.8 / MAS
1015	Cadmium	0.005 mg/L	ND	0.0010 mg/L	EPA 200.8 / MAS
1020	Chromium	0.1 mg/L	ND	0.0070 mg/L	EPA 200.8 / MAS
1024	Cyanide (total)	0.2 mg/L	ND	0.010 mg/L	SM 4500-CN E / CEG
1035	Mercury	0.002 mg/L	ND	0.00020 mg/L	EPA 200.8 / MAS
1036	Nickel	0.1 mg/L	ND	0.0050 mg/L	EPA 200.8 / MAS
1045	Selenium	0.05 mg/L	ND	0.0020 mg/L	EPA 200.8 / MAS
1052	Sodium	200 mg/L	12 mg/L	5.0 mg/L	EPA 200.7 / MDS
1085	Thallium	0.002 mg/L	ND	0.0010 mg/L	EPA 200.8 / MAS

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Reviewed by

Debra Karlsson, Project Manager

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Page 2 of 6

Page 2 of 7



BSK Associates Vancouver
 2517 E. Evergreen Blvd.
 Vancouver, WA98661
 360-750-0055 (Main)
 360-750-0057 (FAX)



Oregon Drinking Water Program Chemical Analysis Report

Water System Information		Sample Information	
PWS ID:		Collection Date: 03/26/2019	Report Date: 04/09/2019
PWS Name: Willamette Egg Farms		Source ID (EP-A, EP-B, etc.):	
PWS Address:		Sample Type: Other	
		Sample/Lab ID: V9C0430-01	
Location Information: Irrigation Well - West of Hwy 170 across from Plant			

All compliance samples to be taken at Entry Point (EP). This is after treatment (if any) and prior to first user.
 Analytical results meet all NELAC requirements unless otherwise noted.
 *separate forms needed for each analyzing lab

Lab PERFORMING Analysis* - BSK Associates Laboratory Fresno 4021

OR DW - Regulated Synthetic Organic Compounds

Analyte Code	Analyte	MCL	Result	Limit of Quantitation	Test Method / Analyst
2946	Ethylene Dibromide (EDB)	0.00005 mg/L	ND	0.000050 mg/L	EPA 504.1 / YNV
2931	Dibromochloropropane	0.0002 mg/L	ND	0.00020 mg/L	EPA 504.1 / YNV
2005	Endrin	0.002 mg/L	ND	0.000020 mg/L	EPA 505 / YNV
2010	BHC-Gamma (Lindane)	0.0002 mg/L	ND	0.000040 mg/L	EPA 505 / YNV
2015	Methoxychlor	0.04 mg/L	ND	0.00020 mg/L	EPA 505 / YNV
2020	Toxaphene	0.003 mg/L	ND	0.0020 mg/L	EPA 505 / YNV
2042	Hexachlorocyclopentadiene	0.05 mg/L	ND	0.00020 mg/L	EPA 505 / YNV
2065	Heptachlor	0.0004 mg/L	ND	0.000080 mg/L	EPA 505 / YNV
2067	Heptachlor Epoxide	0.0002 mg/L	ND	0.000040 mg/L	EPA 505 / YNV
2274	Hexachlorobenzene	0.001 mg/L	ND	0.00020 mg/L	EPA 505 / YNV
2383	Total Polychlorinated Biphenyls	0.0005 mg/L	ND	0.00020 mg/L	EPA 505 / YNV
2959	Chlordane	0.002 mg/L	ND	0.00040 mg/L	EPA 505 / YNV
2031	Dalapon	0.2 mg/L	ND	0.0010 mg/L	EPA 515.4 / VTL
2040	Picloram	0.5 mg/L	ND	0.00010 mg/L	EPA 515.4 / VTL
2041	Dinoseb	0.007 mg/L	ND	0.00020 mg/L	EPA 515.4 / VTL
2105	2,4-D	0.07 mg/L	ND	0.00010 mg/L	EPA 515.4 / VTL
2110	2,4,5-TP (Silvex)	0.05 mg/L	ND	0.00020 mg/L	EPA 515.4 / VTL
2326	Pentachlorophenol	0.001 mg/L	ND	0.000040 mg/L	EPA 515.4 / VTL
2035	Di (2-ethylhexyl)- Adipate	0.4 mg/L	ND	0.0013 mg/L	EPA 525.3 / JKH
2037	Simazine	0.004 mg/L	ND	0.00015 mg/L	EPA 525.3 / JKH
2039	Di (2-ethylhexyl)-Phthalate	0.006 mg/L	ND	0.0013 mg/L	EPA 525.3 / JKH
2050	Atrazine	0.003 mg/L	ND	0.00020 mg/L	EPA 525.3 / JKH
2051	Lasso (Alachlor)	0.002 mg/L	ND	0.00040 mg/L	EPA 525.3 / JKH
2306	Benzo-(A)-Pyrene	0.0002 mg/L	ND	0.000040 mg/L	EPA 525.3 / JKH
2046	Carbofuran	0.04 mg/L	ND	0.0020 mg/L	EPA 531.1 / PNN
2036	Oxamyl (Vydate)	0.2 mg/L	ND	0.0040 mg/L	EPA 531.1 / PNN
2034	Glyphosate	0.7 mg/L	ND	0.013 mg/L	EPA 547 / JNG
2033	Endothall	0.1 mg/L	ND	0.0090 mg/L	EPA 548.1 / ZZZ
2032	Diquat	0.02 mg/L	ND	0.0020 mg/L	EPA 549.2 / VTL

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Debra Karlsson, Project Manager

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BSK Associates Vancouver
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 360-750-0057 (FAX)



Oregon Drinking Water Program Chemical Analysis Report

Water System Information	Sample Information
PWS ID:	Collection Date: 03/26/2019 Report Date: 04/09/2019
PWS Name: Willamette Egg Farms	Source ID (EP-A, EP-B, etc.):
PWS Address:	Sample Type: Other
	Sample/Lab ID: V9C0430-01
Location Information: Irrigation Well - West of Hwy 170 across from Plant	

All compliance samples to be taken at Entry Point (EP). This is after treatment (if any) and prior to first user.
 Analytical results meet all NELAC requirements unless otherwise noted.
 *separate forms needed for each analyzing lab

Lab PERFORMING Analysis* - BSK Associates Laboratory Fresno 4021

OR DW - Regulated Volatile Compounds

Analyte Code	Analyte	MCL	Result	Limit of Quantitation	Test Method / Analyst
2378	1,2,4-Trichlorobenzene	0.07 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2380	cis-1,2-Dichloroethene	0.07 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2964	Dichloromethane	0.005 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2968	o-Dichlorobenzene	0.6 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2969	p-Dichlorobenzene	0.075 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2976	Vinyl Chloride	0.002 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2977	1,1-Dichloroethylene	0.007 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2980	1,2-Dichloroethane	0.005 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2981	1,1,1-Trichloroethane	0.2 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2982	Carbon Tetrachloride	0.005 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2983	1,2-Dichloropropane	0.005 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2984	Trichloroethylene	0.005 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2985	1,1,2-Trichloroethane	0.005 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2987	Tetrachloroethylene	0.005 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2989	Chlorobenzene	0.1 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2990	Benzene	0.005 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2991	Toluene	1 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2992	Ethylbenzene	0.7 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2996	Styrene	0.1 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2979	trans-1,2-Dichloroethene	0.1 mg/L	ND	0.00050 mg/L	EPA 524.2 / ANM
2955	Xylenes	10 mg/L	ND	0.00050 mg/L	EPA 524.2a / NEP

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Oregon Drinking Water Program Chemical Analysis Report

V9C0430

Willamette Eggs - OR Report Form

Detailed Narrative

No Comments.

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Page 1 of 1

Turnaround Time Request

Standard - 10 business days

Rush (Surcharge may apply)

Date needed:

V9C0430 03/26/2019
WILLA0000 10

*Required Fields: Temp: 7.8 IR#: 51

Company/Client Name*: Willamette Eggs Farms
Report Attention*: Karen McFadden
Invoice To*:
Additional cc's: Karen McFadden
PO#:
Phone*: (503) 651-6944
Fax*:
E-mail*: Karen.McFadden@willametteeggs.com

Address*: 31348 S. Hwy 170
City*: Camas
State*: OR
Zip*: 97013
Project: Well Plan Review
Project #:
Reporting Options:
 Trace (J-Flag)
 E-Mail
 Fax
 Mail
 Swamp
 EDD Type:

Sampler Name (Printed/Signature)*: Dawn Bernard
Compliance?: Yes No
State: WA OR
System/PWS ID:
DOH Source/Source ID:
Water System Name:
County:

Sample Composition: Single Source **Blended **Composite Distribution Sample
**List sources in Source ID field
Sample Taken: Before Treatment After Treatment No Treatment
Group (WA only): A B
Matrix Types: SW=Surface Water BW=Bottled Water GW=Ground Water WW=Waste Water STW=Storm Water DW=Drinking Water SO=Solid

#	Sample Description/Location*	Sampled*		Matrix*	Comments	# of cont.	Oregon IOC *	Oregon SOC **	EPA 524.2, OR (VOC)	EPA 504	Bact.	OWRID	MAY 31 2019	RECEIVED
		Date	Time											
1	Injection Well - West of Hwy 170 across storm plant	3-26-19	9:45am				X	X	X	X				
2	TB# 0918017					2				X				
3	TB# 0219018					2			X	X				
	*Arsenic, barium, cadmium, chromium, cyanide, fluoride, mercury, nickel, nitrate/nitrite, selenium, sodium, antimony beryllium, thallium													
	**EPA 504.1, EPA 505, EPA 515.4, EPA 525.3, EPA 531.1, EPA 547, EPA 548.1, EPA 549.2													

Receipt Conditions in Vancouver: Temp: Received Via: UPS WALK-IN FED EX Counter: Direct Transport

Relinquished by: (Signature and Printed Name) Dawn Bernard
Company: Willamette Eggs
Date: 3-26-19 Time: 10:15am
Received by: (Signature and Printed Name)
Company:
Relinquished by: (Signature and Printed Name)
Company:
Date: 3/26/19 Time: 1:05
Received for Lab by: (Signature and Printed Name)

Payment Received at Delivery: Check / Cash Date: Amount: PIA#: Inil.

Shipping Method: ONTRAC UPS GSO WALK-IN FED EX Alaskan Airlines Courier: Custody Seal: Y/N
Cooling Method: Wet Blue None Chilling Process Begun: Y/N

Payment for services rendered as noted herein are due in full within 30 days from the date invoiced, if not so paid, account balances are deemed delinquent. Delinquent balances are subject to monthly service charges and interest specified in BSK's current Standard Terms and Conditions for Laboratory Services. The person signing for the Client/Company acknowledges that they are either the Client or an authorized agent to the Client, that the Client agrees to be responsible for payment for the services on this Chain of Custody, and agrees to BSK's terms and conditions for laboratory services unless contractually bound otherwise. BSK's current terms and conditions can be found at www.bskassociates.com/BSKLabTermsConditions.pdf

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BSK Associates Vancouver
 2517 E. Evergreen Blvd.
 Vancouver, WA 98661
 360-750-0055 (Main)
 360-750-0057 (FAX)

V9D0390

4/23/2019

Invoice: V901213

Karen McFadden
 Willamette Egg Farms
 31348 S Highway 170
 Canby, OR 97013

RE: Report for V9D0390 Willamette Eggs

Dear Karen McFadden,

Thank you for using BSK Associates for your analytical testing needs. In the following pages, you will find the test results for the samples submitted to our laboratory on 4/18/2019. The results have been approved for release by our Laboratory Director as indicated by the authorizing signature below.

The samples were analyzed for the test(s) indicated on the Chain of Custody (see attached) and the results relate only to the samples analyzed. BSK certifies that the testing was performed in accordance with the quality system requirements specified in the 2009 TNI Standard. Any deviations from this standard or from the method requirements for each test procedure performed will be annotated alongside the analytical result or noted in the Case Narrative. Unless otherwise noted, the sample results are reported on an "as received" basis.

This certificate of analysis shall not be reproduced except in full, without written approval of the laboratory.

If additional clarification of any information is required, please contact your Project Manager, Debra Karlsson, at (360) 750-0055.

Thank you again for using BSK Associates. We value your business and appreciate your loyalty.

Sincerely,

Debra Karlsson, Project Manager

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Accredited in Accordance with NELAP
 ORELAP #WA100008-010

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The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.

V9D0390 FINAL 04232019 1611



Case Narrative

V9D0390
Willamette Eggs

Project and Report Details

Client: Willamette Egg Farms
Report To: Karen McFadden
Project #: Willamette Eggs
Received: 4/18/2019 - 14:23
Report Due: 4/23/2019

Invoice Details

Invoice To: Willamette Egg Farms
Invoice Attn: Jamie Turner
Project PO#: -

Sample Receipt Conditions

Cooler: Default Cooler
Temperature on Receipt °C: 8.6

Containers Intact
COC/Labels Agree
Received On Blue Ice
Sample(s) arrived at lab on same day sampled.
Packing Material - Other
Initial receipt at BSK-VAL

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Data Qualifiers

The following qualifiers have been applied to one or more analytical results:

None applied

Report Distribution

Recipient(s)	Report Format	CC:
Karen McFadden	FINAL.RPT	jamie.turner@willametteEgg.com

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The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.

V9D0390 FINAL 04232019 1611



V9D0390

Willamette Eggs

Willamette Eggs

Certificate of Analysis

Sample ID: V9D0390-01

Sampled By: Gary Kendall

Sample Description: Well across street // Willamette Egg

Sample Date - Time: 04/18/19 - 10:30

Matrix: Drinking Water

Sample Type: Investigative

BSK Associates Vancouver

Microbiology

Analyte	Method	Result	Batch	Prepared	Analyzed	Qual
Coliform, Presence/Absence by Colifert						
E. Coli	SM 9223B	Absent	V900431	04/18/19 15:10	04/19/19 09:30	
Total Coliform	SM 9223B	Absent	V900431	04/18/19 15:10	04/19/19 09:30	

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V9D0390 FINAL 04232019 1611

Certificate of Analysis

Notes:

- The Chain of Custody document and Sample Integrity Sheet are part of the analytical report.
- Any remaining sample(s) for testing will be disposed of according to BSK's sample retention policy unless other arrangements are made in advance.
- All positive results for EPA Methods 504.1 and 524.2 require the analysis of a Field Reagent Blank (FRB) to confirm that the results are not a contamination error from field sampling steps. If Field Reagent Blanks were not submitted with the samples, this method requirement has not been performed.
- Samples collected by BSK Analytical Laboratories were collected in accordance with the BSK Sampling and Collection Standard Operating Procedures.
- J-value is equivalent to DNQ (Detected, not quantified) which is a trace value. A trace value is an analyte detected between the MDL and the laboratory reporting limit. This result is of an unknown data quality and is only qualitative (estimated). Baseline noise, calibration curve extrapolation below the lowest calibrator, method blank detections, and integration artifacts can all produce apparent DNQ values, which contribute to the un-reliability of these values.
- (1) - Residual chlorine and pH analysis have a 15 minute holding time for both drinking and waste water samples as defined by the EPA and 40 CFR 136. Waste water and ground water (monitoring well) samples must be field filtered to meet the 15 minute holding time for dissolved metals.
- Field tests are outside the scope of laboratory accreditation and there is no certification available for field testing.
- Summations of analytes (i.e. Total Trihalomethanes) may appear to add individual amounts incorrectly, due to rounding of analyte values occurring before or after the total value is calculated, as well as rounding of the total value.
- RL Multiplier is the factor used to adjust the reporting limit (RL) due to variations in sample preparation procedures and dilutions required for matrix interferences.
- Due to the subjective nature of the Threshold Odor Method, all characterizations of the detected odor are the opinion of the panel of analysts. The characterizations can be found in Standard Methods 2170B Figure 2170:1.
- The MCLs provided in this report (if applicable) represent the primary MCLs for that analyte.

Definitions

mg/L:	Milligrams/Liter (ppm)	MDL:	Method Detection Limit	MDA95:	Min. Detected Activity
mg/Kg:	Milligrams/Kilogram (ppm)	RL:	Reporting Limit: DL x Dilution	MPN:	Most Probable Number
µg/L:	Micrograms/Liter (ppb)	ND:	None Detected below MRL/MDL	CFU:	Colony Forming Unit
µg/Kg:	Micrograms/Kilogram (ppb)	pCi/L:	PicoCuries per Liter	Absent:	Less than 1 CFU/100mLs
%:	Percent	RL Mult:	RL Multiplier	Present:	1 or more CFU/100mLs
NR:	Non-Reportable	MCL:	Maximum Contaminant Limit	U:	The analyte was not detected at or above the reported sample quantitation limit.

Please see the individual Subcontract Lab's report for applicable certifications.

BSK is not accredited under the NELAP program for the following parameters:

NA

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Certificate of Analysis

Certifications: Please refer to our website for a copy of our Accredited Fields of Testing under each certification.

Fresno

State of California - ELAP	1180	State of Hawaii	4021
Los Angeles CSD	9254479	NELAP certified	4021-011
State of Nevada	CA000792019-1	State of Oregon - NELAP	4021-011
EPA - UCMR4	CA00079	State of Washington	C997-19

Sacramento

State of California - ELAP 2435

San Bernardino

State of California - ELAP	2993	Los Angeles CSD	9254478
NELAP certified	4119-003	State of Oregon - NELAP	4119-003

Vancouver

NELAP certified	WA100008-011	State of Oregon - NELAP	WA100008-011
State of Washington	C824-18b		

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The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.

Sample Integrity



BSK Bottles: Yes No Page of

COC Info		Yes	No	NA	Were correct containers and preservatives received for the tests requested?		Yes	No	NA
Was temperature within range? Chemistry $\leq 6^{\circ}\text{C}$ Micro $< 8^{\circ}\text{C}$		<u>Yes</u>	<u>No</u>	NA			<u>Yes</u>	No	NA
If samples were taken today, is there evidence that chilling has begun?		<u>Yes</u>	No	NA	Were there bubbles in the VOA vials? (Volatiles Only)		Yes	<u>No</u>	NA
Did all bottles arrive unbroken and intact?		<u>Yes</u>	No		Was a sufficient amount of sample received?		<u>Yes</u>	No	
Did all bottle labels agree with COC?		<u>Yes</u>	No		Do samples have a hold time <72 hours?		<u>Yes</u>	No	
Was sodium thiosulfate added to CN sample(s) until chlorine was no longer present?		Yes	No	<u>NA</u>	Was PM notified of discrepancies? PM: _____ By/Time: _____		Yes	No	<u>NA</u>
250ml(A) 500ml(B) 1Liter(C) 40ml VOA(V)		Checks	1	2	3				
Bacti Na ₂ S ₂ O ₃		-	1B						
None (P) White Cap		-	1B						
Cr6 (P) Lt. Green Label/Blue Cap NH ₄ OH(NH ₄) ₂ SO ₄ DW		Cl, pH > 8							
Cr6 (P) Pink Label/Blue Cap NH ₄ OH(NH ₄) ₂ SO ₄ WW		pH 9.3-9.7							
Cr6 (P) Black Label/Blue Cap NH ₄ OH(NH ₄) ₂ SO ₄ 7199 ***24 HOUR HOLD TIME***		pH 9.0-9.5							
HNO ₃ (P) Red Cap or HCl (P) Purple Cap/Lt. Blue Label		-	1B						
H ₂ SO ₄ (P) or (AG) Yellow Cap/Label		pH < 2							
NaOH (P) Green Cap		Cl, pH > 10	1A						
NaOH + ZnAc (P)		pH > 9							
Dissolved Oxygen 300ml (g)		-							
None (AG) 608/8081/8082, 625, 632/8321, 8151, 8270		-							
HCl (AG) Lt. Blue Label O&G, Diesel		-							
Ascorbic, EDTA, KH ₂ Ct (AG) Pink Label 525		-	2C						
Na ₂ O ₃ S 250mL (AG) Neon Green Label 515		-	1A						
Na ₂ S ₂ O ₃ 1 Liter (Brown P) 549		-	1C						
Na ₂ S ₂ O ₃ (AG) Blue Label 548, THM, 524		-	1A						
Na ₂ S ₂ O ₃ (CG) Blue Label 504, 505, 547		-	1V	2V					
Na ₂ S ₂ O ₃ + MCAA (CG) Orange Label 531		pH < 3	1V						
NH ₄ Cl (AG) Purple Label 552		-							
EDA (AG) Brown Label DBPs		-							
HCL (CG) 524, 2, BTEX, Gas, MTBE, 8260/624		-	3W			2V			
Buffer pH 4 (CG)		-							
H ₃ PO ₄ (CG) Salmon Label		-							
Other:									
Asbestos 1Liter Plastic w/ Foil		-							
Low Level Hg / Metals Double Baggie		-							
Bottled Water		-							
Clear Glass 250mL / 500mL / 1 Liter		-							
Soil Tube Brass / Steel / Plastic		-							
Tedlar Bag / Plastic Bag		-							
Split	Container	Preservative	Date/Time/Initials	Container	Preservative	Date/Time/Initials			
	S P			S P					
	S P			S P					
Comments	RECEIVED								
	MAY 31 2019								
OWRD									

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Labeled by: _____ @ _____

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Molalla Plumbing, Inc.
 119 Center Street
 PO Box 183
 Molalla, Oregon 97038

CCB# 62150

FAX COVER LETTER

To:

DANN BARNARD

From:

Kew

Date: 4-29-19

Number of Pages: 3

Phone: 829-2225

Fax: 829-2785

Remarks:

Diagram for new water line from well across
 the street!

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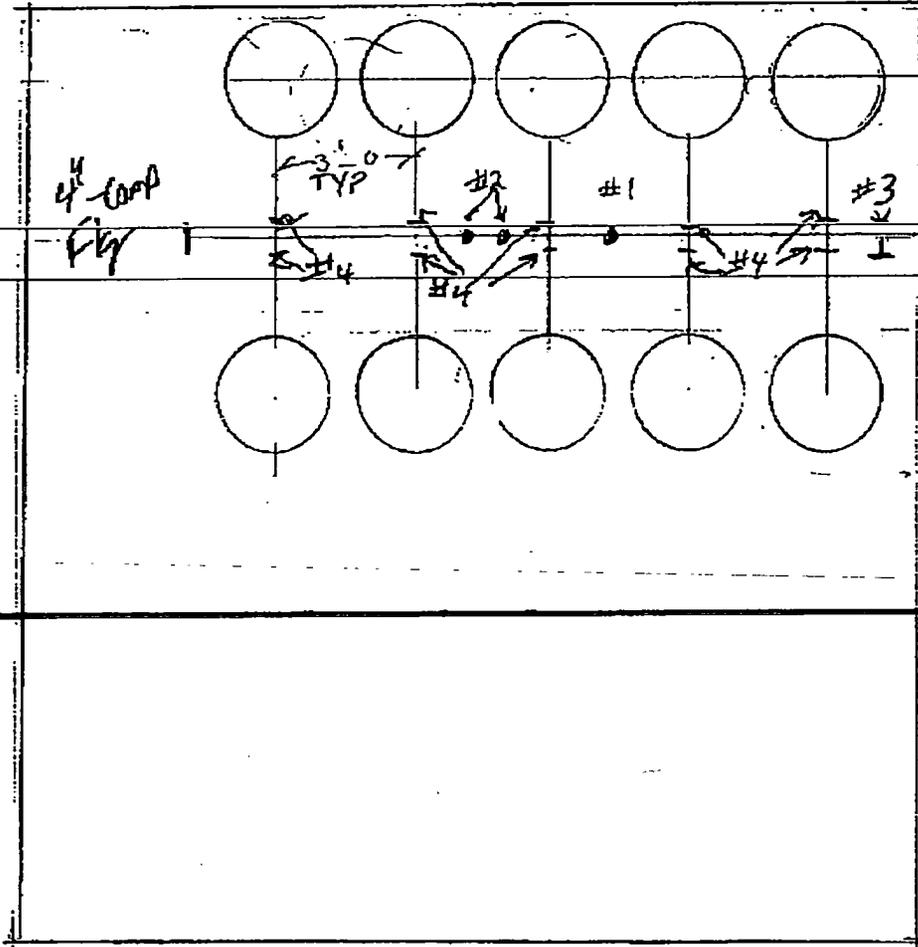
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- #1 - 2" F.I.P.T Looking UP
- #2 - 3/4" F.I.P.T Looking UP
- #3 - 3/8" F.I.P.T Looking Sideways
- #4 1/4" F.I.P.T Looking Sideways

$1/4 = 1-0"$

05/01/2019 12:19PM FAX 503829292

96181

MICHAEL FOODS^{INC} 301 Carlson Parkway, Suite 400
 Minnetonka, Minnesota 55305

PAGE 1 / 1
 CHECK NO. 1529809

Invoice No.	Invoice Date	Gross Amount	Discount	Net Amount	Description
APP FEE 2019	04/30/2019	825.00	0.00	825.00	APPLICATION FEE 2019
Vendor 628688	Check Date 05/22/2019	Total 825.00	Total 0.00	Total 825.00	Payment Supp 04 Corporate A/P Special Handling

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MICHAEL FOODS^{INC} 301 Carlson Parkway, Suite 400
 Minnetonka, Minnesota 55305

Bank Of America
 Commercial Disbursement Account
 Northbrook, IL
 70-2328
 0719

CHECK NO. 1529809

DATE 05/22/2019

EIGHT HUNDRED TWENTY-FIVE and 00/100 Dollars.

AMOUNT OF CHECK
 *****825.00*

PAY TO THE ORDER OF **OREGON HEALTH AUTHORITY
 PUBLIC HEALTH
 500 SUMMER STREET NORTHEAST
 SALEM OR 97301-1082**

Michael Foods Inc.

RLV Vlt

Authorized Signature

THE BACK OF THIS DOCUMENT HAS A CUSTOM WATERMARK - HOLD AT AN ANGLE TO VIEW - VOID IF NOT PRESENT

1529809



301 Carlson Parkway, Suite 400
 Minnetonka, Minnesota 55305

PAGE 1 / 1
 CHECK NO. 1529809

Invoice No.	Invoice Date	Gross Amount	Discount	Net Amount	Description
APP FEE 2019	04/30/2019	825.00	0.00	825.00	APPLICATION FEE 2019

Oregon Health Services
 NOTICE OF REMITTANCE

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 MAY 31 2019

87-2019
 License Number

OWRD
 Payment Received

Payor	Index	PCA	Object Code	Amount
Michael Foods 301 Carlson Pkwy #400 Minnetonka, mn 55305	50204	51059	2135	825 -

13196