

**WATER RIGHT TRANSFER COVER SHEET**

Transfer: T- 13295

Transfer Specialist:

Transfer Type: GR Modification

<b>Applicant:</b> OREGON DEPARTMENT OF CORRECTIONS CHAD NAUGLE 3601 STATE ST SALEM, OR 97301 Email: _____ Phone: _____		<b>Agent:</b> <input type="checkbox"/> N/A GSI WATER SOLUTIONS 1600 SW WESTERN AVENUE SUITE 240 CORVALLIS, OR 97333 Email: _____ Phone: _____	
<b>Irrigation District:</b> <input type="checkbox"/> N/A Email: _____		<b>CWRE:</b> <input type="checkbox"/> N/A Email: _____	
<b>Affected Local Gov'ts:</b> <input type="checkbox"/> N/A City Of Salem Planning Division Email: _____		<b>Affected Tribal Gov't:</b> <input type="checkbox"/> N/A UNAVAILABLE Email: _____	
<b>Current Landowner if other than Applicant:</b> <input type="checkbox"/> N/A Email: _____		<b>Receiving Landowner:</b> <input type="checkbox"/> N/A Email: _____	

**Water Rights Affected**

File Marked	App. File # or Decree Name	Permit	Certificate	RR/CR Needed	RR/CR Nos.
<input type="checkbox"/>	GR-692		GR-690	<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>				<input type="checkbox"/> Yes <input type="checkbox"/> No	
<input type="checkbox"/>				<input type="checkbox"/> Yes <input type="checkbox"/> No	

**Key Dates & Initial Actions:**

Rec'd: November 27, 2019	Proposed Action(s): POINT OF APPROPRIATION; PLACE OF USE; USE	
Fees Pd: 1250.00	WM District: 16	ODFW District:
Initial Public Notice: December 17, 2019	WM Review sent:	ODFW Review sent:
Acknowledgement Letter Sent <input checked="" type="checkbox"/>		GW Review sent: <input type="checkbox"/> N/A
County sent cc: of Ack Letter <input type="checkbox"/>	BOR notified (date): <input type="checkbox"/> N/A	
Newspaper quote requested:	Request for news \$ sent:	News \$ received:
Request to publish sent:	Affidavit of publication received:	Last day of publication:

Document	Drafted	Peer Review	Changes Made	Coordinator	Changes Made	Signature Bin	Signature Date
DPD	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	CW Sent: _____	N/A
PD	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____	Date: _____
FO	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____ Initials: _____	Date: _____	Date: _____

Special Issues: \_\_\_\_\_

Special Order Volume: Vol. \_\_\_\_\_ Pages \_\_\_\_\_



# Oregon

Kate Brown, Governor

T 13295  
Water Resources Department

725 Summer St NE, Suite A

Salem, OR 97301

(503) 986-0900

Fax (503) 986-0904

December 10, 2019

OREGON DEPARTMENT OF CORRECTIONS 3601 STATE ST SALEM, OR 97301

Reference: Application T- 13293, T-13294, T-13295

On November 27, 2019, we received your water right Transfer application. The application was accompanied by \$1250.00 for 3 applications, total \$3750. Our receipt number 131417 is enclosed.

By copy of this letter, we are asking the Watermaster for a report regarding the potential for injury to existing water rights which may be caused by the requested change. A review form will also be sent to our groundwater staff to determine whether the proposed well accesses the same source of water as the original well.

This application may require publication of a notice for two consecutive weeks in a newspaper with general circulation in the area where the water right is located. If it is determined that newspaper notice will be required, the Department will prepare the notice and notify you of the cost. You will be responsible for submitting payment to the Department prior to publication of the notice.

You may not use water for the new use, in the new place of use or from the new point of appropriation until a final order approving recognition of the groundwater registration modification application has been issued by the Department. If the land is sold before the modification is approved, the buyer's consent to the modification will be required unless a recorded deed or other legal document clearly established that the groundwater registration was not conveyed in the sale.

Refer to the following page for a chart showing the steps and expected timelines for the processing of your application.

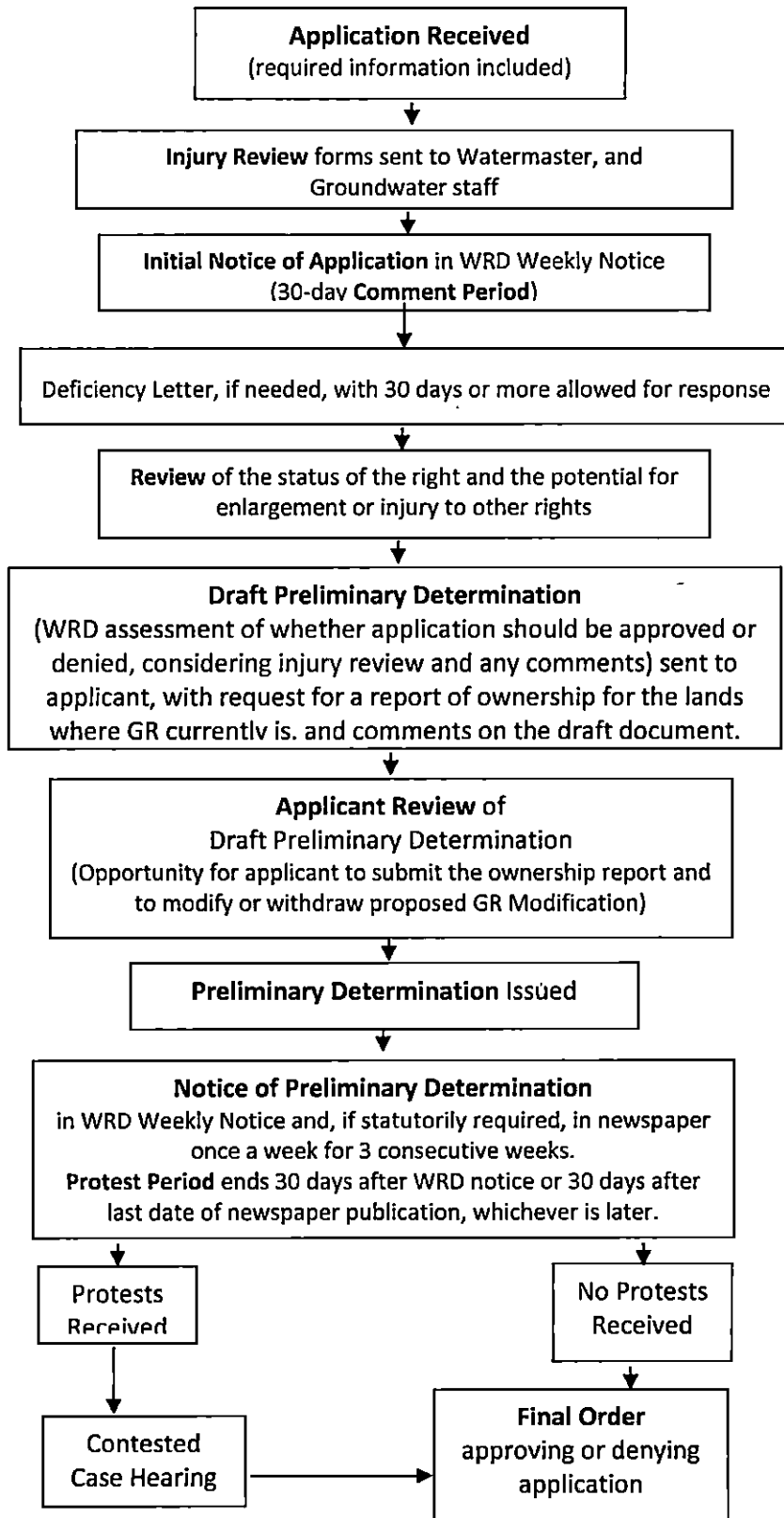
If you have any questions, please contact the Transfer Section at (503) 986-0815.

Cc: Watermaster Dist. #16 (via email)  
GSI Water Solutions  
Santiam Water Control District  
City of Salem Planning Department

Enclosure

# Groundwater Registration Modification Process

OAR 690 Division 382





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

# 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)**

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Application Map Checklist.
- Part 3 – Completed Applicant Information and Signature.
- Part 4 – Completed Groundwater Registration Modification Application – Groundwater Registration Information. (Only one Groundwater registration per application, unless the Groundwater registrations to be modified are layered). (GR 692 included in Attachment A)
- Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner). **Attachment B**
- Groundwater registration modification fees – Amount enclosed: \$ 1,250.00. (\$875.00 for a place of use change only; \$1,250.00 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 <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>.  
 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 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. **Attachment C**
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation. **Attachment E**

(For Staff Use Only)

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

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Assignment Form and fee not enclosed/insufficient
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> 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°).

## Part 3 of 4 – Applicant Information and Signature

### Applicant Information

APPLICANT/BUSINESS NAME <b>Oregon Department of Corrections, Attn: Chad Naugle</b>		PHONE NO. <b>503-373-7544</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>3601 State Street</b>			FAX NO.
CITY <b>Salem</b>	STATE <b>OR</b>	ZIP <b>97301</b>	E-MAIL <b>Chad.E.Naugle@doc.state.or.us</b>
<b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b>			

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

APPLICANT/BUSINESS NAME <b>GSI Water Solutions, Inc., Attn: Kimberly Grigsby</b>		PHONE NO. <b>541-257-9004</b>	ADDITIONAL CONTACT NO.
ADDRESS <b>1600 SW Western Blvd, Suite 240</b>			FAX NO.
CITY <b>Corvallis</b>	STATE <b>OR</b>	ZIP <b>97333</b>	E-MAIL <b>kgrigsby@gsiws.com</b>
<b>BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.</b>			

Explain in your own words what you propose to accomplish with this modification; and why:  
**The Oregon Department of Corrections (ODOC) is proposing to modify the character of use, place of use, and change the points of appropriation to 3 wells, which will be located at 3 of the 5 proposed locations. ODOC proposes to use the groundwater registration for irrigation of 26.4 acres.**

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

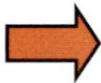
Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

(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.

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: **Statesman Journal**.

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



  
 Applicant Signature

**Chad Naugle, Sustainability Programs Manager**  
 Print Name (and Title if applicable)

11/13/19  
 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.*

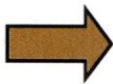
**Check the appropriate box, if applicable:**

Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district. **The water use will be located within SWCD but the ground water will not be served by the district.**

IRRIGATION DISTRICT NAME <b>Santiam Water Control District</b>	ADDRESS <b>284 East Water Street</b>	
CITY <b>Stayton</b>	STATE <b>OR</b>	ZIP <b>97383</b>

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 <b>N/A</b>	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 <b>City of Salem Planning Division</b>	ADDRESS <b>555 Liberty St SE #305</b>	
CITY <b>Salem</b>	STATE <b>OR</b>	ZIP <b>97301</b>

ENTITY NAME <b>N/A</b>	ADDRESS	
CITY	STATE	ZIP

## 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	1/4		Tax Lot, DLC or Gov. Lot	Measured Distances (from a recognized survey corner)
<b>GR-692 Well</b>	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	<b>MARI 6913</b>	8	S	2	W	5	SW	SW	105	5119 feet South and 5252 feet West from NE Corner, Section 5
Well 1 (A)	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		8	S	2	W	5	SW	SE	100	745 feet North and 1635 feet West from the SE corner of Section 5
Well 1 (B)	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		8	S	2	W	5	SW	SE	100	290 feet North and 1335 feet West from the SE corner of Section 5
Well 2 (A)	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		8	S	2	W	5	SE	SE	100	1245 feet North and 1140 feet West from the SE corner of Section 5
Well 2 (B)	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		8	S	2	W	8	NE	NE	100	40 feet South and 1055 feet West from the SE corner of Section 5
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed		8	S	2	W	5	NE	SE	100	1775 feet North and 600 feet West from the SE corner of Section 5

\* ODOC is planning to drill only 3 wells but is providing 5 potential well locations in this application.

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 checked="" 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.



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-692 (Certificate # GR-690)**

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				
<b>EXAMPLE</b>																										
2	S	9	E	15	NE	NW	100		15.0	Irrigation	POD #1 POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10.0		POD #5	1901
"	"	"	"	"	"	"	"	"	"	EXAMPLE	"	"	"	2	S	9	E	2	SW	NW	500		5.0		POD #6	1901
													USE/POU/ POA	8	S	2	W	4	NW	SW	100	DLC 47	8.7	Irrigation	3 of the following: Well 1 (A), Well 2 (A), Well 3, Well 1 (B), Well 2 (B)	Dec. 1937
														8	S	2	W	4	SW	SW	100	DLC 47	16.8			
														8	S	2	W	4	SE	SW	100	DLC 47	0.3			
														8	S	2	W	9	NW	NW	100	DLC 47	0.6			
TOTAL ACRES												TOTAL ACRES										26.4				

Additional remarks: ODOC requests to change GR-692 to authorize irrigation of 26.4 acres for 3 wells located at 3 of the 5 proposed locations. GR-692 originally authorized domestic use at the Oregon State Hospital.

13295

Groundwater Registration # GR-692 (Certificate # GR-690)

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:  
**CERTIFICATE 68665.**

**Santiam Water Control District (SWCD) is the holder of Certificate 68665, which currently authorizes irrigation on the proposed POU. ODOC will work with SWCD to voluntarily diminish the portion of Certificate 68665 appurtenant to the proposed POU to supplemental irrigation concurrently with approval of this groundwater registration modification application.**



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/](http://apps.wrd.state.or.us/apps/gw/well_log/))

AND/OR

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

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

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide 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
Well 1 (A)	No		120 ft (est.)	10in	+1-50 ft (est.)	0-20 ft (est.)	50-120 ft (est.)	16 ft (est.)	Sand and Gravel	200 gpm (est.)
Well 2 (A)	No		120 ft (est.)	10in	+1-50ft (est.)	0-20 ft (est.)	50-120 ft (est.)	16 ft (est.)	Sand and Gravel	200 gpm (est.)
Well 3	No		120 ft (est.)	10in	+1-50 ft (est.)	0-20 ft (est.)	50-120 ft (est.)	16 ft (est.)	Sand and Gravel	200 gpm (est.)
Well 1 (B)	No		100 ft (est.)	10in	+1-50 ft (est.)	0-20 ft (est.)	50-100 ft (est.)	16 ft (est.)	Sand and Gravel	200 gpm (est.)
Well 2 (B)	No		100 ft (est.)	10in	+1-50 ft (est.)	0-20 ft (est.)	50-100 ft (est.)	16 ft (est.)	Sand and Gravel	200 gpm (est.)

Attachment A

Groundwater Registration GR-692

Application for a Groundwater Registration Modification – Oregon Dept. of Corrections

# Registration Statement

## OF CLAIMANT OF RIGHT TO APPROPRIATE GROUND WATER

TO THE STATE ENGINEER OF OREGON:

I, State of Oregon, Oregon State Hospital

of Station A, Salem County of Marion  
(Mailing address)

State of Oregon, do hereby make application for a certificate of registration as evidence of a right to appropriate ground water.

1. Source from which water is withdrawn is Pump well #2  
(Flowing well, pump well, infiltration trench, or tunnel)

2. Location is: 3 miles SE Salem city limits  
(Approximate distance and direction from nearest city or town)

and is more particularly described as follows:

(a) 5119 ft. South & 5252 ft. West of NE Corner of Sec. 5 Twp. 8S Rge. 2W  
(Give distance and bearing to corner of section or other legal subdivision)

being within S/4 of S/4 of Sec. 5, Twp. 8S, Rge. 2W  
(Smallest legal subdivision) (N. or S.) (E. or W.)

or (b) within limits of recorded platted property, town or city:

in Lot \_\_\_\_\_, Block \_\_\_\_\_ of \_\_\_\_\_  
(Name of plat or addition)

County of \_\_\_\_\_  
(If within city or town, give name)

3. Construction Work was begun on 1937, was completed on 1937  
(Date) (Date)

and the ground water claimed was first used for the purposes set out below on 1937  
(Date)

since which time the water has been used intermittently  
(Continuously or intermittently)

from 1937 to \_\_\_\_\_  
(Date) (Date)

4. Quantity of water claimed and used is 150 gallons per minute; 244 acre feet per year.

5. Purpose or Purposes for which water is used Domestic  
(Domestic, irrigation, municipal, manufacturing, industrial, etc.)

6. Description of Well: Depth 160 feet. Type Drilled  
(Dug or drilled)

diameter 10 inches. Elevation of ground at well site 233.00 feet, mean sea level.  
(As near as known)

Depth to water table 15 feet.

7. Capacity of Well: \_\_\_\_\_ g.p.m. with \_\_\_\_\_ feet drawdown;

\_\_\_\_\_ g.p.m. with \_\_\_\_\_ feet drawdown.

Date of test Information not available

If Flowing Well: Measured discharge \_\_\_\_\_ g.p.m. on \_\_\_\_\_  
(Date)

Shut-in pressure at ground surface \_\_\_\_\_ lbs. per sq. in. on \_\_\_\_\_  
(Date)

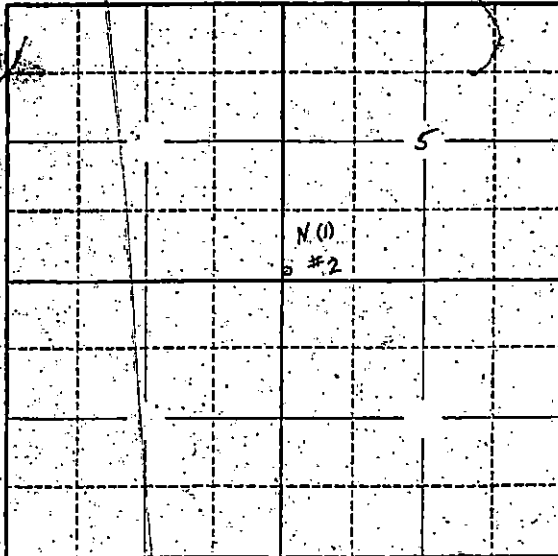
Water is controlled by \_\_\_\_\_  
(Cap. valve, etc.)

13295





Township 8S Range 2W W.M.  
North



Locate well and acreage of irrigated land on plat.  
Scale: 2" = 1 Mile

STATE OF OREGON

County of Marion } ss.

I, D. K. Brooks, M. D., being first duly sworn, do hereby certify that I have read the foregoing Registration Statement and that all of the items therein contained are true to the best of my knowledge and belief.

*D. K. Brooks*  
(Signature of Registrant)

Subscribed and sworn to before me this 18th day of October, 1957, 19   

My commission expires Sept. 23, 1960

*Caroline E. Keeling*  
(Notary Public)

(SEAL)

**CERTIFICATE OF REGISTRATION**

STATE OF OREGON

County of Marion } ss.

This is to certify that the foregoing Registration Statement, was received in the office of the State Engineer on the 16th day of December, 1957, at 8:00 o'clock A. M. and has been duly recorded in said office in Book No. 4 of Registration Statements on page GR-690 C.

Witness my hand this 21st day of January

*Lewis A. Stanley*  
(State Engineer)

By \_\_\_\_\_

(Deputy)

GR - 690 C



**Authorized POA: MARI 6913**

**Attachment D  
Well Log**

Application for a Groundwater Registration Modification – Oregon Dept. of Corrections

**13295 -**

