

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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Che	ck all it	ems included with this application. ($N/A = Not Applicable$)	APR 2 0 2020
\boxtimes		Part 1 – Completed Minimum Requirements Checklist.	
\boxtimes		Part 2 – Completed Application Map Checklist.	OWRD
		Part 3 – Application Fee, payable by check to the Oregon Water Resources Departs 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, ca Service at (503) 986-0801.	
\boxtimes		Part 4 – Completed Applicant Information and Signature.	
\boxtimes		Part 5 – Information about Permits to be Amended: Number of permits to be ame List the Permits here: <u>Permit G-15950</u> Please include a separate Part 5 for each permit. (See instructions on page 6)	ended: <u>1</u>
\boxtimes		Completed Permit Amendment Application Map (Does not have to be prepared by Water Right Examiner).	a Certified
	N/A	Request for Assignment Form and statutory fee. The request for assignment form completed if the applicant is not the permit holder of record and needs to be assign permit; or the landowner of the proposed place of use is not the permit holder of reneds to be assigned to the permit (the Request for Assignment Form is available of https://www.oregon.gov/OWRD/Forms/Pages/default.aspx). Assignment is not need applicant is the permit holder of record.	ed to the ecord and online at
	N/A	Affidavit(s) of Consent are required from all permit holder(s) of record if the perm to the applicant or other permit holders of record that are not listed as applicants.	it is not assigned
	N/A	Oregon Water Resources Department's Land Use Information Form with approval (or signed land use form receipt stub) from each local land use authority in which violeted, conveyed, and/or used. Not required if water is to be diverted, conveyed, only on federal lands or if all of the following apply: a) a change in place of use on structural changes, c) the use of water is for irrigation only, and d) the use is locate irrigation district or an exclusive farm use zone.	water is to be and/or used lly, b) no
\boxtimes	N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or a point(s) of appropriation.	dditional
	N/A	Geologist Report for a change from a surface water point of diversion to a ground appropriation (well), if the proposed well is more than 500 feet from the surface water more than 1000 feet upstream or downstream from the point of diversion. (ORS 54)	ater source and
		(For Staff Use Only) WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Application fee not enclosed/insufficient Map not included or incomplete Land Use Form not enclosed or incomplete Additional signature(s) required Part is incomplete ther/ is incomplete Staff: 503-986 Date: / /	
		Julii.	

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 <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

	N/A	If more than three permits are involved, separate maps for each permit. APR 2 0 2020
\boxtimes		Permanent quality printed with dark ink on good quality paper.
\boxtimes		The size of the map can be $8\frac{1}{2} \times 11$ inches, $8\frac{1}{2} \times 14$ inches, 11×17 inches, or up to 30×30 inches. For 30×30 inch maps, one extra copy is required.
\boxtimes		A north arrow, a legend, and scale.
		The scale of the map must be: $1 \text{ inch} = 400 \text{ feet}$, $1 \text{ inch} = 1,320 \text{ feet}$, the scale of the county assessor map if the scale is not smaller than $1 \text{ inch} = 1,320 \text{ feet}$, or a scale that has been preapproved by the Department.
\boxtimes		Township, Range, Section, 1/4 1/4, DLC, Government Lot, and other recognized public land survey lines.
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
\boxtimes		Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
\boxtimes		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.
\boxtimes		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 $-42^{\circ}32'15.5"$) or degrees-decimal with five or more digits after the decimal (example -42.53764°).

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	FEE WORKSHEET for PERMIT AMENDMENT								
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,160						
	Types of change proposed: ☐ Place of Use	REC	EIVED						
	Point of Diversion/Appropriation								
	Number of above boxes checked = $\frac{2(2a)}{2}$	APR 2	0 2020						
	Subtract 1 from the number in line $2a = \frac{1}{2b}$ If only one change, this will be 0	OW	/RD						
2	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » »	2	\$930						
	Number of permits included in Permit Amendment 1 (3a)		Ψ/30						
	Subtract 1 from the number in 3a: 0 (3b) If only one permit this will be 0								
3	Multiply line 3b by \$520 and enter » » » » » » » » » » » » » »	3	\$0						
	Do you propose to add or change a well, or change from a surface water POD								
	to a well?								
	□ No: enter 0 »» » » » » » » » » » » » » » » » » »		CO						
4	Yes: enter \$410 » » » » » » » » » » » » » » » » » »	4	\$0						
	Do you propose to change the place of use? No: enter 0 on line 5 » » » » » » » » » » » » » » » » » »								
	Yes: enter the cfs for the portions of the permits to be amended (see								
	example below*): 0.18 (5a)								
	Subtract 1.0 from the number in 5a above: -0.82 (5b)								
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » » » »								
	If 5b is greater than 0, round up to the nearest whole number: 0 (5c) and								
5	multiply 5c by \$350, then enter on line 5 » » » » » » » » »	5	\$0						
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$2,090						
	Is this permit amendment:		Ψ2,000						
	necessary to complete a project funded by the Oregon Watershed								
	Enhancement Board (OWEB) under ORS 541.932?								
	endorsed in writing by ODFW as a change that will result in a net								
	benefit to fish and wildlife habitat?								
	If one or more boxes is checked, multiply line 6 by 0.5 and enter on line 7 »								
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » » »	7	\$0						
8	Subtract line 7 from line 6 » » » » » » » » Permit Amendment Fee:	8	\$2,090						

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

- 1. For irrigation calculate cfs for each permit involved as follows:
 - a. Divide total authorized cfs by total acres in the permit (for S-12345, 1.25 cfs \div 100 ac); then multiply by the number of acres to be changed to get the application cfs (x 45 ac = 0.56 cfs).
 - b. If the water right permit does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (For S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs)
- 2. Add cfs for the portions of permits on all the land included in the application; however **do not count** cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land. The fee should be assessed only once for each "on the ground" acre included in the application. (In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0).

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.					
Stephen A. Koch			(503) 793-8973						
ADDRESS				FAX NO.					
27815 S. Elisha Rd.									
CITY	STATE	ZIP	E-MAIL						
Canby	OR	97013	skoch@canby.com						
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE									
DEPARTMENT ELECTRONIC	ALLY, CO	PIES OF THE FIN	AL ORDER DOCUMENT	S WILL ALSO BE MAILED.					

AGENT/BUSINESS N	AME			PHONE NO.	ADDITIONAL CONTACT NO.			
ADDRESS 18487 S. Valley V	ista Road			(503) 632-5016	(503) 632-5983 (Co FAX NO. (503) 632-5983	enj		
CITY Mulino	n							
					ORRESPONDENCE FR TS WILL ALSO BE M.			
				nplish with this per to conform to our c	mit amendment; ar urrent operations.	nd why:		
If you need addition	nal space, cont	inue on a s	eparate piece of pape	er and attach to the app	lication as "Attachmen	ıt 1".		
Act. (Federa	ıl stimulus d	ollars)	ally or partially fu		can Recovery and	Reinvestment		
If NO, inclu	de either:							
	•	_	form (with require applicant(s), Ol		ment fee), assigning	g all or a		
	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								
			ecepted by the Dep			APR 2 0 2020		
If NO, what a	re the comple	tion dates	of the permit(s)?			OWRD		
• If the per	mit completion	on date ex	pires while the Peri	mit Amendment App	olication 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.

Applicant Signature Ste	Ve Koch ame and title if applicable	4-7-20 ate						
Applicant Signature . Print No	ame and title if applicable	Pate RECEIVED APR 2 0 2020						
Check one of the following:		OWRD						
The applicant is responsible for complete continue to be sent to the applicant.	tion of change(s). Notices and	d correspondence should						
The permit holder(s) of record will be refinal order is issued. Copies of notices a of record.								
Check the appropriate box, if applicable:	· ·							
Check here if any of the permits proposed by an irrigation or other water district.	l for amendment are or will b	e located within or served						
IRRIGATION DISTRICT NAME NA	ADDRESS							
CITY	STATE	ZIP						
Check here if water for any of the permits contract for stored water with a federal ag		ice agreement or other						
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 Co. Department of Transportation and Development, Planning Division ADDRESS 150 Beavercreek Road								
CITY Oregon City	STATE Oregon	97045						
ENTITY NAME	ADDRESS							
СПҮ	STATE	ZIP						

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.

APR 2 0 2020

PERMIT # G-15950

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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)	I	`wp	R	ng	Sec	1/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)	
Authorized Well 1	□ Authorized □ Proposed	CLAC 12500	4	s	1	E	24	SE	sw	TL 1400	1,270 feet north and 2,000 feet east from the SW corner, Section 24.	
Re- described Well 1	☐ Authorized ☐ Proposed	CLAC 12500	4	s	1	E	24	SE	sw	TL 1400	1,250 feet north and 1,950 feet east from the SW corner, Section 24.	
Authorized Well 2	□ Authorized □ Proposed	CLAC 12469	4	s	1	E	24	sw	SE	Lot 2	130 feet north and 3,070 feet east from the SW corner, Section 24.	
Re- described Well 2	☐ Authorized ☐ Proposed	CLAC 12469	4	s	1	E	24	sw	SE	Lot 2	1,210 feet south and 430 feet east from the SW corner, DLC 46.	
Well 3	Authorized Proposed	CLAC 61795	4	s	1	E	23	SE	SE	TL 1801	1,040 feet north and 200 feet west from the SE corner, Section 23.	
Well 4	☐ Authorized☐ Proposed	NA	4	s	1	E	24	NW	N W	TL 1100	1,160 feet south and 160 feet east from the NW corner, Section 24.	
Check	all type(s) of cha	ange(s) prop	osed	l belo	ow (e	chan	ge "C	ODES	" are	provideo	l in parentheses):	
\boxtimes	Place of Use (I	POU)					Poi	int of A	Approp	oriation/V	Vell (POA)	
	Point of Divers	sion (POD)					Ad	ditiona	ıl Poin	t of Appr	ropriation (APOA)	
	Additional Point of Diversion (APOD) Surface water POD to Ground Water POA (SW/GW)											
Will al	l of the proposed	d changes af	fect	the e	ntir	e wa	ter us	e pern	nit?			
	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.										nanged.	

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? \boxtimes Yes \square 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? \boxtimes Yes \square 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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Table 2. Description of Changes to Water Use Permit # G-15950

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each POD/POA. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

VED	RECEI	7.59	EZ	AL ACR	TOT										7.56	SE	Y ACKI	IATC	T					1.1
† 0-9-8	Re-described Wells 1,2 and Authorized J,c slls Wells 3,4	4.62	٧N	3600	MS	MN	77	E	L	S	Þ										111111111111111111111111111111111111111			3
†0-9-8	Re-described Wells 1,2 and Authorized Wells 3,4	4. 9	VN	1300,	MN	MS	77	E	I	S	Þ	AOT, DOT	†0-9-8	Authorized Wells 4,5,2,1	0.92	VN	009ε	MS	MN	77	H	ı	S	0 F 0
†0-9-8	Re-described Wells 1,2 and Authorized y,c slls Wells 3,4	£.11	VN	0011	MN	MN	77	E	I	S	Þ	AOT, DOT	†0-9-8	Authorized Wells 4,2,2,1	0.7	VN	0011	MN	MN	† 7	E	I	S	t
†0-9-8	Re-described Wells 1,2 and Authorized \$\psi_0 \text{sll} sll	€.7	VN	1081	SE	ЗE	52	Е	I	s	Þ	AOT, UOT	†0-9-8	Authorized Wells 4,6,2,1	2.8	VN	1081	ЗE	ЗE	57	E	I	S	Þ
†0-9-8	Re-described Wells 1,2 and Authorized Authorized \$\psi_{\psi}\$	0.0£	VN	1071	NE	ЗE	23	E	I	S	t	voa 'noa	†0-9-8	Authorized Wells 4, E, 2, 1	0.04	٧N	1071	NE	SE	57	E	I	S	Þ
†0-9-8	Re-described Wells 1,2 and Authorized Authorized Wells 3,4	€.6	VN	0091	NE	NE	23	Е	I	S	t	AOT, UOT	†0-9-8	Authorized Wells 4, E, 2, 1,	1.2.2	٧N	0091	NE	NE	57	Е	I	s	Þ
Priority Date	POD(s) or POA(s) to be used (from	Acres (if applicable)		Tax Lot	%	%	oo8	ສເ	Rı	dм	ΛL	from previous	Priority Date	POD(s) or POA(s) (name or number from Table 1)		DFC Fot or GAt	Tax Lot	%	%	oəs	Зu	В	dγ	T
S	ZED CHVNCE uqs)			appear	200		guit	sil s	ТЪ			Proposed Proposed		ORE PROPO		titite:	CHVI	us on	sbbes	that	gui			L —

Additional remarks: We do not consider that this transfer includes a change in POA, because Wells I & 2 were re-described to reflect their locations as described in the most recent certificate issued, Certificate 94707, as well as in Certificates 51320 and 52594, all of which were authorized years prior to authorization of Permit G-15950.

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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: <u>CERTIFICATE 68116</u>
<u>AND 94707. HOWEVER, SINCE THIS PERMIT IS FOR NURSERY USE, IT IS NOT</u>
<u>CONSIDERED A LAYERED RIGHT, AND CAN BE MOVED SEPARATELY.</u>

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.

Table 3. Construction of Point(s) of Appropriation

Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide the information will delay the processing of your transfer application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right	
Authorized and re-described Well 1	YES	CLAC 12500		See Well Log CLAC 12500 RECEIVED							
Authorized and re-described Well 2	YES	CLAC 12469		See Well Log CLAC 12469 APR 2 0 2020						Not less than full rate	
Well 3	YES	CLAC 61795		See Well Log CLAC 61795							
Well 4	NO	NA	400 feet	10 inch	0 to 400	0 to 50 feet	TBD	NA	Alluvial		

1/e// WATER WELL REPORT E CE NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the STATE OF OREGON STATE ENGINEER, SALEM, OREGON 97310 within 30 days from the date of well completion. State Permit No. G-4654 Drawdown is amount water level is lowered below static level (11) WELL TESTS: (1) OWNER: Name Mutus Krokherger Was a pump test made? Yes \(\) No If yes, by whom? Pailler Yield: 500 gal./min. with 73 ft. drawdown after PT 3 Box 18 onk one. " (2) LOCATION OF WELL: drawdown after Bailer test gal./min. with County (ACK A MLAS Driller's well number Artesian flow g.p.m. Date 14 SW 1/4 Section 24 T. HS W.M. Temperature of water 5.3 Was a chemical analysis made? 🗌 Yes 🕱 No Bearing and distance from section or subdivision corner (12) WELL LOG: Diameter of well below casing Depth drilled # # 6 ft. Depth of completed well Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation. MATERIAL (3) TYPE OF WORK (check): TOP SOU Well 🔀 Deepening [Reconditioning [Abandon [Dark Brown SILt &Clay ndonment, describe material and procedure in Item 12. ment levorel (5) TYPE OF WELL: (4) PROPOSED USE (check): Rotary Driven [Domestic | Industrial | Municipal Cable Jetted Del Irrigation Test Well | Other Dug Bored [(6) CASING INSTALLED: Threaded [Welded [wrown " Diam, from ft. to ft. Gage ft. to ft. Gage" Diam. from (7) PERFORATIONS: Perforated? Yes | No Type of perforator used Yy in. by Size of perforations 422VC 2.0 perforations from 170 ft. to 180 300 perforations from 230 ft. to 2H5 200 perforations from 365 ft. to 975 10 perforations from 390 ft. to 395 ... perforations from (8) SCREENS: Well screen installed?

Yes No Manufacturer's Name Model No ECEIV 5-19 19 6 Completed Work started Diam. Slot size Set from Date well drilling machine moved off of well (9) CONSTRUCTION: (13) PUMP: Well seal-Material used in seal 4 xout Manufacturer's Name Depth of seal _____ ft. Was a packer used? ____/YO Diameter of well bore to bottom of seal Water Well Contractor's Certification: Were any loose strata cemented off? Tyes No Depth ... This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. Was a drive shoe used? X Yes ☐ No Was well gravel packed?
Yes No Size of gravel: Gravel placed from ft. to John Did any strata contain unusable water? 🖸 Yes 💢 No depth of strata

WBeck Welldrilling

**

hrs.

TO

6

78

FROM

6

38

105

315 322

365 374

374 389 389 396 396 430

130 434 434 446

canby on

Drilling Maching Operator's License No. .

Contractor License No. 44

ft. below land surface Date 8-//

lbs. per square inch Date

Type of water?

Static level

Artesian pressure

Method of sealing strata off

(10) WATER LEVELS:

WATER WELL REPORT

STATE ENGINEER, SALEM, OREGON 973R ECE VIEGAS TOP OREGON within 30 days from the date of well completion.

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	· · · · · · · · · · · · · · · · · · ·	
(1) OWNER: WATER RESOURCES DEP	(10) LOCATION OF WELL:	APR 2 0 2020
Name Mrs. John Koch SALEM, OREGON	County Clackamas Driller's well no	umber
Address 11585 S. Riggs Damm Rd.	SW SE Section 24 T. 4S	R. 1E OWRD.M.
Canby, Oregon 97013	Bearing and distance from section or subdivisi	lon corner
(2) TYPE OF WORK (check):		
New Well _ Deepening		
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed w	vell.
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found 80	#
Rotary Driven Domestic A Industrial Municipal	Alaman Balantan Carlos	surface. Date 10/24/7
Cable		re inch. Date
	Artesian pressure ins. per squar	e inch. Date
CASING INSTALLED: Threaded Welded	(12) WELL LOG: Diameter of well	below casing
8 "Diam from + 2 ft to 198 ft Gage .250	Depth drilled 227 ft. Depth of compl	
" Diam. from ft. to ft. Gage	Formation: Describe color, texture, grain size	Red Eas (
" Diam, from ft. to ft. Gage	and show thickness and nature of each stratu	m and aquifer penetrated,
PERFORATIONS: Perforated? Y Yes No.	with at least one entry for each change of forma position of Static Water Level and indicate prin	
Type of perforator used Mills knife	MATERIAL	
~ / 0		From To SWL
60 80 00	Top soil Clay, ten	0 2
18	Clay, ten	2 14
18 724 726	Clay, blue & gravel	14 36 36 48
perforations from 152 ft. to 120 ft.	Gravel with clay, brown	48 80
(7) SCREENS: Well screen installed? Yes No	Gravel, med, brown	80 90 20
Manufacturer's Name	Clay, ten with gravel	90 111
Type Model No.	Gravel, med. brown	111 114 20
Diam. Slot size Set from ft. to ft.	Gravel with clay	114 118
Diam. Slot size Set from ft. to ft.	Gravel, med. brown	118 120 20
(8) WELL TESTS: Drawdown is amount water level is	Gravel with clay, blue	120 124
lowered below static level	Gravel, med.	124 126 20
Was a pump test made? Tyes Tho If yes, by whom?	Clay, grey	126 152
i: gal./min. with ft. drawdown after hrs.	Shale, hard, gritty	152 154 16
" " " " " " " " " " " " " " " " " " " "	Clay, grey to blue Gravel, med. sand, med.	154 175 175 178 20
" " " " " " " " " " " " " " " " " " "	Sandy, clay, black	175 178 20 178 181
Bailer test 60 gal./min. with 6 ft. drawdown after 11/hrs.	Gravel, med. Sand, coarse	
Artesian flow g.p.m.	Cont.	1011100120
perature of water 54 Depth artesian flow encountered ft.	Work started 10/16 19 75 Complete	d 12/18 19 75
(9) CONSTRUCTION:	Date well drilling machine moved off of well	12/18 19 75
Rentonite	Drilling Machine Operator's Certification:	
30	This well was constructed under my	direct supervision
Well sealed from land surface toft. Diameter of well bore to bottom of seal 12 in.	Materials used and information reported	above are true to my
Diameter of well bore below seal in.	best knowledge and belief.	70/70
Number of sacks of cement used in well sealsacks	[Signed] (Drilling Machine Operator)	Date12/19, 1975
Number of sacks of bentonite used in well seal	Drilling Machine Operator's License No.	86
Brand name of bentonite Internstional		
Number of pounds of bentonite per 100 gallons	Water Well Contractor's Certification:	
of water 100 lbs./100 gals.	This well was drilled under my jurisdi	ction and this report is
Was a drive shoe used? Tyes 🗆 No Plugs Size: location ft.	Name G. Westerberg	.G.L.
Did any strata contain unusable water? Yes T No	(Person, firm or corporation)	(Type or print)
Type of water? depth of strata	Address Rt. 1 Box 151 Mul	ino, Oregon
Method of sealing strata off	[Signed] C. D. Westerfey	
Was well gravel packed? Yes No Size of gravel:	(Water Well Contra	actor)
Gravel placed fromft. toft.	Contractor's License No. 86 Date	12/19 19 75
(VISV ADDITIONAL CT		, 10

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

CLAC state Well No. H.9/1E-24

State Permit No.

STATE OF OREGON (Please type of print)

(Do not write above this line)

(1) OWNER:	(10) LOCATION OF WELL:	
Name Mrs. John Koch	County Clacksman Driller's well nu	nber
Address 11585 S. Riggs Damm Rd.	SW 34 SE 34 Section 24 T. 48	R. IE W.M.
Canby, Oregon	Bearing and distance from section or subdivisio	n corner
(2) TYPE OF WORK (check):		
New Well ☐ Deepening ☐ Reconditioning ☐ Abandon ☐		ALLEADANAMANAMANAMANAMANAMANAMANAMANAMANAMAN
If abandonment, describe material and procedure in Item 12.	(11) WATER LEVEL: Completed we	ell.
(3) TYPE OF WELL: (4) PROPOSED USE (check):	Depth at which water was first found	ft.
Rotary Driven Domestic Industrial Municipal Domestic	Static level ft. below land su	urface. Date
Dug 🔲 Bored 🖂 Irrigation 📑 Test Well 🖂 Other 🖂	Artesian pressure lbs. per square	inch. Date
CASING INSTALLED: Threaded Welded	(12) WELL LOG: Diameter of well be	elow casing
" Diam. from ft. to ft. Gage	Depth drilled ft. Depth of comple	
" Diam. from ft. to ft. Gage	Formation: Describe color, texture, grain size a	
" Diam. from ft. to ft. Gage	and show thickness and nature of each stratum	and aquifer penetrated,
PERFORATIONS: Perforated? Yes No.	with at least one entry for each change of formati position of Static Water Level and indicate princ	
		
Type of perforator used	MATERIAL	From To SWL
Size of perforations in. by in.	Cont.	700 702
perforations from	Clay, purple, sandy	188 192
perforations from ft. to ft.	Clay, grey	192 201 201 21 8 26
perforations from ft. to ft.	Sandstone, formation	201 218 26
(7) SCREENS: Well screen installed? Yes No	black	218 221
Manufacturer's Name	Clay grey, sandy	221 227
Type Model No.	Clay, grey	224 227
Diam. Slot size Set from ft. to ft.		
Diam, Slot size Set from ft. to ft.	DEAFINED	
	RECEIVED	
(8) WELL TESTS: Drawdown is amount water level is lowered below static level		RECEIVED
Was a pump test made? ☐ Yes ☐ No If yes, by whom?	JANG 1976	
i: gal./min. with ft. drawdown after hrs.	WATER RESQUECES DEPT.	APP 2 0 2020
n . n u	SALEM, OREGON	AI II & O LOLO
н н н о		- bwrb
Bailer test gal./min. with ft. drawdown after hrs.		DANID
Artesian flow g.p.m. perature of water Depth artesian flow encounteredft.	Work started 10/16 19-75complete	d 12/18 1975
(9) CONSTRUCTION:	Date well drilling machine moved off of well	12/18 1975
	Drilling Machine Operator's Certification:	
Well seal—Material used	This well was constructed under my	direct supervision.
Well sealed from land surface to ft.	Materials used and information reported	above are true to my
Diameter of well bore to bottom of seal in.	best knowledge and belief.	. 12/10 75
Diameter of well bore below seal in.	[Signed] (Drilling Machine Operator)	Date 12/19, 19.75
Number of sacks of cement used in well sealsacks	Drilling Machine Operator's License No.	
Number of sacks of bentonite used in well sealsacks		
Brand name of bentonite	Water Well Contractor's Certification:	
Number of pounds of bentonite per 100 gallons	This well was drilled under my jurisdi	ction and this report is
of water lbs./100 gals.	true to the best of my knowledge and beli	lef.
Was a drive shoe used?	Name C. G. Westerberg (Person, firm or corporation)	(Type or wint)
Did any strata contain unusable water? Yes No	()	•
Type of water? depth of strata	Address t Box 151, Mulin	DyVIICEOIL
Method of sealing strata off	[Signed] (Water Went Contr.	
Was well gravel packed? ☐ Yes ☐ No Size of gravel:	(Water Well Contr	12/19 75
Gravel placed from tt. to tt.	Contractor's License No Date	

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Nesterberg Drilling, Inc. STATE OF OREGON WATER SUPPLY WELL RENOWT 2 3 20036728 S. Kropf Rd. WELL I.D. # L 78668 (as required by ORS 537.7 WATER RESOURCES ASSILID, OR 97038

SALEM, OREGON

Instructions for completing this report are on the last page of this form. START CARD # 182473 (1) LAND OWNER (9) LOCATION OF WELL (legal description) Well Number Name Steve Koch County Clackamas Address 27815 S. Elisha Rd. Tax Lot 1801 Lot State OR Zip 97013 City Canby S WM Township 4 Range 1 _ 1/4 SE Section 23 SE 1/4 (2) TYPE OF WORK New Well (degrees or decimal) ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment ☐ Conversion " or _ Long _ (degrees or decimal) (3) DRILL METHOD

☑ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud Street Address of Well (or nearest address) 27815 S. Elisha Rd. Canby, OR 97013 Other (10) STATIC WATER LEVEL (4) PROPOSED USE _ ft. below land surface. Date 11-18-05 Domestic | Community ☐ Industrial Irrigation ☐ Thermal ☐ Injection ☐ Livestock Other ft. below land surface. Date Artesian pressure lb. per square inch Date (5) BORE HOLE CONSTRUCTION Special Construction: ☐ Yes ☑ No Depth of Completed Well 250 (11) WATER BEARING ZONES Explosives used: Yes No Type Amount Depth at which water was first found 86' BORE HOLE SEAL From Estimated Flow Rate SWL From Diameter From To Material To Sacks or Pounds DNM 86 160 20-30 gpm 45 12" Bentonite 45 sacks 180 212 200 gpm 45' 8" 45 250 230 50-100 gpm 225 DNM How was seal placed: Method $\square A \square B \square C \square D$ (12) WELL LOG Ground Elevation Other Bentonite placed dry Backfill placed from _____ ft. to Material From To SWL ft. Material 0 Gravel placed from _ ft. to Size of gravel_ Clay silty brown 1 23 (6) CASING/LINER Silt blue 23 36 Clay grey 36 38 Diameter From Gauge Plastic Welded Threaded Cemented gravel brown & grey 38 63 Casing: 8" +1.5" NODDO Cemented gravel tight 63 70 Cemented gravel grey 70 83 Silt grey 83 86 Gravel grey 86 89 Liner: None Silt grey packed 89 100 Clay grey 100 105 Drive Shoe used Inside Outside None Packed silt grey hard 105 115 Final location of shoe(s) 248' Packed silt green 127 115 127 128 Gravel (7) PERFORATIONS/SCREENS Packed silt grey 128 131 Method Holte Air perforator Perforations continued on page 2 ☐ Screens Material Date Started 11-10-05 Completed 11-18-05 From Slot Number Diameter Tele/pipe Casing Liner (unbonded) Water Well Constructor Certification Size I certify that the work I performed on the construction, deepening, alteration, or 1/8x3 abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief. \Box WWC Number 1358 (8) WELL TESTS: Minimum testing time is 1 hour Signed ☐ Pump Bailer Z Air ☐ Flowing Artesian (bunded) Water Well Constructor Certification Yield gal/min Drawdown Drill stem at Time 200 160' I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge Temperature of water 56 Depth Artesian Flow Found and belief. Was a water analysis done? Yes By whom _ WWC Number 6 Did any strata contain water not suitable for intended use? Too little Salty Muddy Odor Colored Other_

Depth of strata:



36728 S. Kropf Rd., Molalla, OR 97038 • Phone: (503) 829-2526 FAX (503) 829-7514

Page 2

OWNER: Steve Koch

ADDRESS: 27815 S. Elisha Rd.

CITY/STATE/ZIP: Canby, OR 97013

WELL ADDRESS: Same

 COUNTY Clackamas
 TOWNSHIP 4S
 RANGE 1E

 SECTION 23
 SE 1/4 SE 1/4 TAX LOT 1801

(12) WELL LOG INFO. CONT'D FROM PREVIOUS PAGE:

MATERIAL	FROM	TO	SWL
Clay grey	131	_135	1
Packed silt green	135	140	
Silt w/ packed sand seams	140	143	
Packed silt grey	143	145	
Siltstone grey	145	156	
Siltstone grey & brown	156	167	
Packed sand brown coarse	167		
loosely packed		170	1
Packed sand grey coarse w/	170		
fine gravel		180	
Packed sand loosely packed	180	192	
Packed sand grey	192	195	
Siltstone grey w/ packed sand	195	212	
Clay grey	212	215	
Siltstone grey soft	215	219	1
Siltstone grey & green w/	219		
packed sand		224	1
Packed sand green w/ wood	224	225	
Sand grey fine to coarse	225	230	
Packed sand dry	230	233	
Clay grey	233	240	
Silt grey	240	250	1
Westerberg Drilling, Inc.			1
36728 S. Kropf Rd.			†
Molalla, OR 97038			i
Molana, OR 77500		<u> </u>	·
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NOV 2 3 2005 WATER RESOURCES DEPT SALEM, OREGON