

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. $(N/A = Not Applicable)$	OCT 1 6 2020
$\boxtimes$		Part 1 – Completed Minimum Requirements Checklist.	001 1 0 2020
$\boxtimes$		Part 2 – Completed Application Map Checklist.	OWRD
$\boxtimes$		Part 3 – Application Fee, payable by check to the Oregon Water Resources Department completed Fee Worksheet, page 3. Try the new online fee calculator at: <a href="http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator">http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator</a> . If you have questions, call 6 Service at (503) 986-0801.	ent, and
$\boxtimes$		Part 4 – Completed Applicant Information and Signature.	
$\boxtimes$		Part 5 – Information about Permits to be Amended: Number of permits to be amended: List the Permits here: Permit G-18191  Please include a separate Part 5 for each permit. (See instructions on page 6)	ded: <u>1</u>
$\boxtimes$		Completed Permit Amendment Application Map (Does not have to be prepared by a Water Right Examiner).	Certified
	⊠ N/A	Request for Assignment Form and statutory fee. The request for assignment form has completed if the applicant is <b>not</b> the permit holder of record and needs to be assigned permit; <b>or</b> the landowner of the proposed place of use is <b>not</b> the permit holder of record needs to be assigned to the permit (the Request for Assignment Form is available only <a href="https://www.oregon.gov/OWRD/Forms/Pages/default.aspx">https://www.oregon.gov/OWRD/Forms/Pages/default.aspx</a> ). Assignment is not needed applicant is the permit holder of record.	to the ord and ine at
	⊠ N/A	Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is to the applicant or other permit holders of record that are not listed as applicants.	s not assigned
	□ N/A	Oregon Water Resources Department's Land Use Information Form with approval an (or signed land use form receipt stub) from each local land use authority in which was diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and only on federal lands or if <b>all</b> of the following apply: a) a change in place of use only, structural changes, c) the use of water is for irrigation only, and d) the use is located virrigation district or an exclusive farm use zone.	ter is to be d/or used b) no
$\boxtimes$	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or add point(s) of appropriation.	itional
	⊠ n/a	Geologist Report for a change from a surface water point of diversion to a ground was 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 540.5)	r 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 Other/Explanation Staff: 503-986-0 Date: / /	

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 RECEIVED 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.

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	⊠ N/A	If more than three permits are involved, separate maps for each permit.
$\boxtimes$		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, $11 \times 17$ inches, or up to $30 \times 30$ inches. For $30 \times 30$ 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, ¼ ¼, 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.
$\boxtimes$	□ 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 $-42^{\circ}32^{\circ}15.5^{\circ}$ ) or degrees-decimal with five or more digits after the decimal (example $-42.53764^{\circ}$ ).

	FEE WORKSHEET for PERMIT AMENDMENT	<u> </u>		
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			
	Point of Diversion/Appropriation			
	Number of above boxes checked = $\frac{1(2a)}{}$			
	Subtract 1 from the number in line $2a = 0$ (2b) If only one change, this will be 0			
_	Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » »			
2		2	\$0	
	Number of permits included in Permit Amendment 1 (3a)			
	Subtract 1 from the number in 3a: <u>0 (3b)</u> 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 »» » » » » » » » » » » » » » » » »			
4		4	\$410	
	Do you propose to change the place of use?			a radio com
	No: enter 0 on line 5 » » » » » » » » » » » » » » » » »		RECEI	VED
	Yes: enter the cfs for the portions of the permits to be amended (see		( )	0
	example below*):(5a)		OCT 16	2020
1	Subtract 1.0 from the number in 5a above: (5b)			
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » »		OWF	an a
	If 5b is greater than 0, round up to the nearest whole number:(5c)		OAAI	112
_ 5	and multiply 5c by \$350, then enter on line 5 » » » » » » » » »	5	\$0	
6	Add entries on lines 1 through 5 above » » » » » » » » » Subtotal:	6	\$1,570	
	Is this permit amendment:			
	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 »		ļ	
7	If no box is applicable, enter 0 on line 7» » » » » » » » » » » » » » »	7	\$0	
8	Subtract line 7 from line 6 » » » » » » » » Permit Amendment Fee:	8	\$1,570	

- \*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).

				. ADDITIONAL CONTACT NO.
APPLICANT/BUSINESS N.	AME		PHONE NO.	. ADDITIONAL CONTACT NO.
Columbia Holdings L	LC c/o Peter Stott_			
ADDRESS				FAX NO.
2775 SW Old Orchard	d Rd			
CITY	STATE	ZIP	E-MAIL	
Portland	OR	97201		
By PROVIDING AN E	E-MAIL ADDRESS,	CONSENT IS G	IVEN TO RECEIVE ALI	CORRESPONDENCE FROM THE
DEDADTMENT EL FO	TRONICALLY, CO	PIES OF THE	FINAL ORDER DOCUM	IENTS WILL ALSO BE MAILED.

Agent Inf	<b>formation</b> – The ag	ent is autl	norized to represen	t the applicant in all	l matters relating to this application.					
AGENT/BUS	SINESS NAME		-	PHONE NO.	ADDITIONAL CONTACT NO.					
Doann Ha	milton			(503) 632-5016	(503) 632-5983 (Cell)					
ADDRESS					FAX NO.					
18487 S. V	alley Vista Road				(503) 632-5983					
CITY	<u> </u>	STATE	ZIP	E-MAIL						
Mulino		OR	97042	phgdmh@gmail.co						
By Prov	IDING AN E-MAIL A	DDRESS, O	CONSENT IS GIVEN	TO RECEIVE ALL (	CORRESPONDENCE FROM THE					
DEPART	MENT ELECTRONIC	ALLY. CO	PIES OF THE FINA	L ORDER DOCUME	NTS WILL ALSO BE MAILED.					
If you need Check	l additional space, con	tinue on a s	eparate piece of pap	er and attach to the ap	this new location as Well 3.  oplication as "Attachment 1".  erican Recovery and Reinvestment					
Is the ap	plicant the permi	t holder (	of record? 🛚 Y	es No						
If NC	), include either:									
A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), <b>OR</b>										
	-	_			nment lee), assigning an or a					

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

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

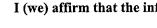
If NO, what are the completion dates of the permit(s)? April 10, 2024

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- 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: The Oregonian



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

Applicant Signature  Applicant Signature  Print N	eter W. SDII ame and title if applicable	10/2/20 Date
,		RECEIVED
Applicant Signature Print	Name and title if applicable	Date 0CT 1 6 2020
Check one of the following:		
The applicant is responsible for comple continue to be sent to the applicant.	tion of change(s). Notices an	d correspondence should
The permit holder(s) of record will be r final 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.	d for amendment are or will b	e located within or served
IRRIGATION DISTRICT NAME NA	ADDRESS	
СПҮ	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 Requirer city, municipal corporation, or tribal governme conveyed or used.	nt) within whose jurisdiction	•
ENTITY NAME Multnomah County Planning	ADDRESS 1600 SE 190 <sup>th</sup> Avenue	
CITY Portland	STATE Oregon	ZIP 97233
ENTITY NAME	ADDRESS	
CITY	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.

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#### PERMIT # G-18191

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POW)RD (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)	Tv	wp	R	'ng	Sec	( )	1/4	Tax Lot; DLC or Gov't	Measured Distances (from a recognized survey corner)		
Well 1	□ Authorized     □ Proposed	MULT 1580, 130171	2	N	1	w	4	NE	SE	TL 700	1,830 feet north and 740 feet west from SE corner, Section 4		
Well 2	□ Authorized     □ Proposed	NA	2	N	1	w	4	NE	SE	TL 700	1,980 feet north and 400 feet west from SE corner, Section 4		
Well 3	☐ Authorized ☐ Proposed	MULT 134712	2	N	1	w	4	NE	SE	TL 700	1,665 feet north and 745 feet west from SE corner, Section 4		
Chec	Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):												
	Place of Use (POU)				L.	=			_		ll (POA)		
	Point of Diversion (	(POD)			$\boxtimes$	A	Additio	nal Po	oint of	Approp	oriation (APOA)		
	Additional Point of	Diversion (A	APO:	D)			lurface SW/G		POD	to Gro	und Water POA		
Will	all of the proposed cha	inges affect	the e	entir	e wa	iter i	use pe	rmit?					
	Yes Complete only "CODES" list									the nex	t page. Use the		
	No Complete all	of Table 2 to	desc	ribe	the	porti	on of	the per	rmit to	be cha	nged.		
For a chan	ge in place of use: - N.	A											
Does the p  ☐ Yes ☐	ermit holder of record No	own or con	trol	the ?	land	TO	which	the p	olace o	of use is	s being moved?		
as a perr	e landowner of the land nit holder of record by fee for an assignment.	TO which the submitting a	ne pl a con	ace on the second secon	of us ted I	e is l Requ	oeing I est for	moved Assig	l must gnmen	be ass t form a	igned to the permit and the required		
	posed place of use cont												
unless th	nitted place of use can be change to non-contigu	ous lands is	in fi	ırthe	ranc	e of	mitiga	tion o	r cons	ervatior	n efforts undertaken		

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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-18191

List the change proposed for the acreage in each 1/4 1/4. If more than one change is proposed, specify the acreage associated with each change. If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands)  The listing that appears on the certificate BEFORE PROPOSED  CHANGES  List only that part or portion of the water right that will be changed.  Twp Rng Sec 1/4 1/4 Cot						Cl "	COD	sed (see ES" vious	5.7		The		ting a		vould	appear	AFTE made Gvt Lot or	Acres	POD(s) or POA(s) to be	GES Priority Date					
												AP(	)A	2	N	1	w	4	NE	SE	700	NA	25.2	Wells 1, 2, and 3	3-23-2018
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Additional remarks: None.

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

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

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

П	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 aguifer.

	•									
Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag	Total well Casing Intervals (feet) Casing (feet) Casing Ca	Well - specific rate (cfs or gpm). If less than full rate of water right						
Well 1	Yes	MULT 1580, 130171	See Well Log MULT 1580, 130171	NOT LESS THAN						
Well 2	No	NA	SEE GW APPLICATION	FULL						
Well 3	Yes	MULT 134712	SEE WELL LOG MULT 134712							

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## Land Use **Information Form**



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.wrd.state.or.us

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Applicant:	<u>Columbia</u>	<u>Holdings,</u>	<u>LLC</u>					00	1 1 0 202
Mailing Ac	ldress: <u>277</u>	5 SW Old	Orchard	Road					OWRD
Portland, OR 97201 City State Zip					Daytime	Daytime Phone:			
Δ land	and Loca	tion							
Please includer	ude the follo	owing info	eloped. A	pplicants for	s where water will be do municipal use, or irrig es for the tax-lot inform	ation uses w	thin irrigation	rce), conv n districts	veyed may
Township	Range	Section	1/4 1/4	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:
2N	1W	4		700	EFU	⊠Diverted	⊠Conveyed	⊠Used	IR
						□Diverted	□Conveyed	□Used	
						□Diverted	Conveyed	□Used	
						□Diverted	□ Conveyed	□Used	
B. Descr	ription of	Propose	ed Use						
Type of app  ☐Permit to		be filed wi Water	th the Water I	ater Resource Right Transfer tion of Conser			Groundwater F	Registration	n Modificati
Source of v	water: □Re	servoir/Pon	.d 🗵	GroundWate	r □Surface Water	(name)	_		
Estimated of	quantity of v	vater need	ed: <u>0.32</u>		⊠cubic feet pe	r second	☐gallons per n	ninute [	□acre-feet
Intended use of water: ⊠Irrigation □Commercial □Municipal □Quasi-Municipal					omestic for	househ	old(s)		
Briefly des	cribe:								
This Lar	nd Use Intoint of app	formation propriation	n Form	is to accon ) for an ex	npany a permit ame isting water right P	ndment ap ermit G-1	pplication the 8191	nat propo	oses to

Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources

See bottom of Page 3.  $\rightarrow$ Department.

### For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information  ✓ Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): MCC 39.4220(A) Farm Uses						
approvals as listed in the table below. (P	vater uses (including proposed construction lease attach documentation of applicable la n/land-use decision and accompanying find iods have not ended, check "Being pursu	ng-use appro ings are suff	ovais which have			
Type of Land-Use Approval Needed (e.g., plan amendments, rezones,	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Lar				
conditional-use permits, etc.)	Tolloid & Stallance	□Obtained □Denied	☐Being Pursued ☐Not Being Pursued			
		□Obtained □Denied	☐Being Pursued ☐Not Being Pursued			
		□Obtained □Denied	☐Being Pursued ☐Not Being Pursued			
		□Obtained □Denied	☐Being Pursued ☐Not Being Pursued			
		☐Obtained	☐Being Pursued ☐Not Being Pursued			
Lieo Estrip	<sub>Title:</sub> Senior Pla	anner				
Name: Lisa Estrin Lisa Estri	Digitally signed by Lisa Estrin Digitally signed by Lisa Estrin Phone: 503-988-0		Date: 10-1-2020	<del></del>		
Signature: Multnomah Count	-		Date.	<del>-</del>		
Note to local government representative: you sign the receipt, you will have 30 days Use Information Form or WRD may presur	Please complete this form or sign the rece from the Water Resources Department's no me the land use associated with the propose	otice date to a d use of wat	return the completed er is compatible with	Land		
Receipt f	or Request for Land Use Infor	<u>mation</u>				
Applicant name:			<del></del>			
City or County:	Staff contact:					
Signature:	Phone:	_ Date:				

The original and first copy of this report are to be filed with the TATE ENGINEER, SALEM, OREGON \$1310, 71, 50 1068 The ase type within 30 days from the date of well completion.	e or print)	,		
SALLM, CRESOR	(11) LOCATION OF WELL:			
(1) OWNER:  Name A. C. Jacobson Jr.	County Multnoman Driller's well no	ımber		
	14 Section 24 T. 21		<b>EW</b>	W.M.
Address Rt 1 Box 119-A portland, Oregon				
(2) TYPE OF WORK (check):	Bearing and distance from section or subdivision	ii comer		
New Well Deepening Reconditioning . Abandon .	20 14 0000			
If abandonment, describe material and procedure in Item 12.				
(3) TYPE OF WELL: (4) PROPOSED USE (check):  Rotary  Driven  Doriven  Domestic  Industrial  Municipal  Dug  Bored  Irrigation  Test Well  Other	(12) WELL LOG: Diameter of well Depth drilled 75 ft. Depth of comp.	and struc	ture of m	ft, aterials;
CASING INSTALLED: Threaded Welded wall  8 Of to 75 ft. Gage wall	and show thickness and nature of each stratu with at least one entry for each change of forn in position of Static Water Level as drilling pr	nation. Re	eport each	change
ft. Gageft.	MATERIAL	From	То	SWL
" Diam, from ft. to ft. Gage	Top soil	0	3	
PERFORATIONS: Perforated? ☐ Yes <b>1</b> No.	Brown clay	3	20	
	Yellow clay	. 20	50	
Type of perforator used	Brown clay	50	60	
Size of perforations in. by in.	Sand and gravel	60	75	<del>·</del> .
perforations from ft. to ft.		<del> </del>	<del></del>	<del></del> ;
perforations fromft. toft.		<del> </del>		<del></del>
perforations fromft. toft.				<del></del>
perforations fromft. toftftftft.		RECE	HVED	-
periorations from		<del>                                     </del>		
(7) SCREENS: Well screen installed? ☐ Yes ■ No		ACT TO	5 2020	·-
Manufacturer's Name				<del></del>
Type Model No		-		
Diam Slot size Set from ft. to ft.		OW	RD	
Diam. Slot size Set from ft. to ft.		<u> </u>	ļ	
(8) WATER LEVEL: Completed well.		ļ	<u> </u>	
see level 10 ft, below land surface Date 4-24-68		<del></del>		
an pressure Ibs. 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?				
	Work started 4-24-68 19 Comple	ted 4.	-24-6E	3 19
gal./min. with ft. drawdown after hrs.	Date well drilling machine moved off of well	-24-6	88	19
<u>~</u>	Drilling Machine Operator's Certification:			- <del></del>
Bailer test 300 gal./min. with 30 ft. drawdown after 1 hrs.	This well was constructed under my d rials used and information reported abo	irect sur	ervision.	Mate- ny best
Artesian flow g.p.m. Date	knowledge and belief.			1
Temperature of water Was a chemical analysis made? ☐ Yes ♣No	[Signed] Walsh Juni	Date 🦨	1-25	, 19 <u>.68</u>
Temperature of Water . Was a circumsta Employee	(Drilling Machine Operator)			
(10) CONSTRUCTION:	Drilling Machine Operator's License No.	254		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Well seal—Material used Bentonite				-
Depth of seal 25 feet ft.  Diameter of well hore to bottom of seal 17 in.	Water Well Contractor's Certification: This well was drilled under my jurisc	liction at	nd this re	eport is ·
<b>2.1.1.1.1.1.1</b>	I true to the best of my knowledge and beli	ief.		
Were any loose strata cemented off? ☐ Yes ♣ No Depth	NAME Ralph Turner Drill:	ing Co	0 •	******
Was a drive shoe used?  Yes No	(Person, firm or corporation)	(Typ	e or print)	022
Did any strata contain unusable water?   Yes No	Address Rte. 1 Box 141	Hills	oro,	Oregon
Type of water? depth of strata	00 1/1.	1.	, , _	
Method of sealing strata off	[Signed](Water Well Contra	ictor)	¥	
Was well gravel packed? ☐ Yes ☐ No Size of gravel:	047	4-2	5	1968
Gravel placed from ft to ft.	Contractor's License No. 247 Date	,f		15 <del></del>

#### STATE OF OREGON

### **MULT 130171**

WELL ID#L_	129641
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WATER SUPPLY WELL REPORT (as required by ORS 537.765)

SKYLES DRILLING, INC.

START CARD# <u>W1041027</u>

Instructions for completing this report are on the last page of this form	03:656-2683	<del></del>				
(1) OWNER: Well Number: 01	(9) LOCATION OF WELL by legal description:					
Name _ Peter Stott	County Multnomah Latitude Longitude Township 2NORTHN or S. Range 1WEST E or W. of WM.					
Address 2775 SW Old Orchard Rd  City Portland State OR Zip 97201	Section 4 04 NE 1/4 <u>SE 1/4</u>					
The state of the s	Tax lot 00700 Lot Block Subdivision Street Address of Well (or nearest address) 22141 NW Reeder Rd,	<del></del>				
(2) TYPE OF WORK:	Portland OP					
New Well Deepening X Alteration (repair/recondition) Abandonmen	(10) STATIC WATER LEVEL:					
(3) DRILL METHOD:	7 ft. below land surface. Date 10/23/2					
X Rotary Air       ☐ Rotary Mud       ☐ Cable       ☐ Auger         ☐ Other       ☐ Other	Artesian pressure	==				
	= (11) WATER BEARING ZONES:					
(4) PROPOSED USE:  □ Domestic □ Community □ Industrial ☑ Irrigation	Depth at which water was first found N/A					
Thermal Injection Livestock Other	From To Estimated Flow Rate St	WL_				
(5) BORE HOLE CONSTRUCTION:						
Special Construction approval Yes No Depth of Completed Weil 71	ft.					
Explosives used Yes X No Type Amount						
HOLE SEAL Amount Diameter From To Material From To sacks or pounds	(12) WELL LOG:					
12 0 22 Cement w/5% 22	Ground elevation					
bentonite   2 19 Sacks   Bentonite   2 0 4 Sacks	- INIGATORIE - INI	WL.				
	Casing Extension & Over-drill 8" casing for new upper seal					
Calculated 19 Sacks						
How was seal placed: Method A B C D E	-	-				
X Other Pumped at bottom: Poured bentonite						
Backfill placed from         ft. to         ft. Material           Gravel placed from         ft. to         ft. Size of gravel	SKYLES DRIEUNG, INC.					
(C) CASING/LINED						
Diameter From To Gauge Steel Plastic Welded Threade						
Casing: 8 +2 0 .250 X	RECE	=IV E				
	A MATERIAL TO A	4 0000				
Liner: None	OCT 1	<u>6 2</u> 020				
Liner: None	RECEIVED					
Drive Shoe used	I OW	/Rb				
Final location of shoe(s) N/A	=  <del>  0CT <b>2 9 2018</b> </del>	- 1				
(7) PERFORATIONS/SCREENS:						
Perforations Method Material	-   OWRD					
Slot Tele/nine						
From To size Number Diameter size Casing Liner						
	Date started 10/22/2018					
	(unbonded) Water Well Constructor Certification:					
	I certify that the work-I performed on the construction, alteration, or abandon-					
(8) WELL TESTS: Minimum testing time is 1 hour	ment 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	mv				
Pump Bailer Air Flowing Artesian	standards. Materials used and information reported above are true to the best of the knowledge and belief	iiiy				
	WWC Number <u>1715</u>					
Yield gal/min Drawdown Drill stem at Time	Signed Date 10/24/2018					
N/A	Skyles Drilling, Inc.  (bonded) Water Well Constructor Certification:	<del></del>				
	I accept responsibility for the construction, alteration, or abandonment work					
performed on this well during the construction dates reported above. All work						
Temperature of Water Depth Artesian Flow found Was a water analysis done? Yes By whom	performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief	ı <b>f.</b> .				
Did any strata contain water not suitable for intended use?	\ WWC Number <u>1998</u>	<del></del>				
Salty Muddy Odor Colored Other	Signed Date 10/24/2018					
Depth of strata:	_ Skyles Drilling, Inc.  NSTRUCTOR SECOND COPY - CUSTOMER					
ORIGINAL - WATER RESOURCES DEPARTMENT FIRST COPY - CO	N21KUCTOK SECOND COFT - COSTOWEK					

		•••••		I			Page 1 of 2	
STATE OF OREGON	MULT	134712	WELL I.D		. ——			
WATER SUPPLY WELL REPORT				T CARD #	1.5.	465		
(as required by ORS 537.765 & OAR 690-205-0210)	6/4/2	2020	ORIGIN	AL LOG	<i>‡</i>			
(1) LAND OWNER Owner Well I.D.		(A) Y O G I TOTA		T Y desert	donomi	ntion)		
First Name PETER Last Name SCOTT  Company NORTHWEST FLORICULTURE		(9) LOCATIO					w F/WWM	
Address 10499 SHAMPOEG RD NE		County MULTNO	<u>MAH</u> 1WP <u>2.0</u>	0 <u>IN</u>	N/5 N 1/4	Tax Lot 70	0	
C: AURORA State OR Zin 97002		Tax Man Number	1/4 01 0		_ '''	Lot		
(2) TYPE OF WORK New Well Deepening Conve		Lat	' "o	r_45.682498	88		DMS or DD	
Alteration (complete 2a & 10) Abandonment(co	mplete 5a)	Tax Map Number Lat° Long°		r122.8086	48 <u>21</u>		_ DMS or DD	
(2a) PRE-ALTERATION Dia + From To Gauge Stl Plstc Wld Thrd		( Stree	et address of w				<del></del> 1	
Casing:		22141 NW REE	DER ROAD PO	ORTLAND,	OR 9723	1		
Material From To Amt sacks/lbs Seal:								
(3) DRILL METHOD		(10) STATIC	WATER L			***	CMT (D)	
Rotary Air Rotary Mud Cable Auger Cable Mud		Evisting Wel	I / Pre-Alteration		ate SV	WL(psi) +	SWL(ft)	
Reverse Rotary Other			Vell	6/2/2020			14	
(4) PROPOSED USE  Domestic  Irrigation  Community	,		Flowing A	Artesian?	Dr	y Hole?		
Industrial/ Commercial Livestock Dewatering		WATER BEARIN	IG ZONES	Depth	water wa	s first found	90.00	
Thermal Injection Other	_	SWL Date	From	To 1	Est Flow	SWL(psi)	+ SWL(ft)	
(5) BORE HOLE CONSTRUCTION Special Standard (A	Attach copy)	6/2/2020	90	118	75		14	
Depth of Completed Well 118.00 ft.								
BORE HOLE SEAL  Dia From To Material From To A	sacks/							
Dia 110m 10 management	Amt lbs					<del> </del>	<del></del>	
6 23 118 Calculated 1	10.5	L				<u></u>		
Calculated		(11) WELL L	OG G	round Eleva	tion			
How was seal placed: Method A B C D	E		Material			From	To	
Other POURED SLOWLY & PR	~ 	BROWN SILTY	CLAY			0	22	
Backfill placed from ft. to ft. Material		GRAY SILTY C				38	74	
Filter pack from ft. to ft. Material Size		FINE GRAY SA GRAVEL & SAI				74	84	
Explosives used: Yes Type Amount		GRAVEL				84	118	
(5a) ABANDONMENT USING UNHYDRATED BENTONI						<u> </u>	-	
Proposed Amount Actual Amount		<u> </u>		DEC		En		
(6) CASING/LINER Casing Liner Dia + From To Gauge Sti Plste	Wid Thed			MEC	<u>                                     </u>			
Casing Liner Dia + From To Gauge Stl Plste  6 X 2 118 .250				- OOT	1 6 21	120		
				<del>- UL-I</del>	B WY	<u> </u>		
	$\vdash$							
<u> </u>	HH			<del></del>	WRI	<b>&gt;</b>	-	
Shoe Inside Outside Other Location of shoe(s) 11	  8	<u> </u>	-	<del></del>				
Temp casing Yes Dia From + To								
(7) PERFORATIONS/SCREENS						<u> </u>	<del> </del>	
Perforations Method		<u> </u>				•	<del></del>	
Screens Type Material Perf/ Casing/Screen Scrn/slot Slot # of	Tele/	Date Started_6/1/2020						
Perf/ Casing/ Screen Scrn/slot Slot # of Screen Liner Dia From To width length slots		(unbonded) Wa	ter Well Cons	tructor Cer	tification	١		
		I certify that the	work I perfor	med on the	construction	tion, deepen 1 Oregon w	ing, alteration, or ater supply well	
		construction star	i tilis well is idards. Materi	als used and	informa	tion reported	above are true to	
		the best of my ki						
		License Number	·		Date _			
(8) WELL TESTS: Minimum testing time is 1 hour		Signed						
Pump Bailer • Air Flowing A		(bonded) Water	Well Constru	ator Cartifi	cation			
Yield gal/min Drawdown Drill stem/Pump depth Duration (I	hr)	Laccent respons	ibility for the	construction	. deenen	ing, alteration	n, or abandonmen	
75 100 1		work performed	on this well du	ring the cons	struction	dates reporte	d above. All work	
		performed durin	ng this time is	in compli	ance wit	h Oregon w	ater supply wel ledge and belief.	
Temperature 56 °F Lab analysis Yes By							leage una bonon	
Water quality concerns? Yes (describe below) TDS amount 292 From To Description Amount	ppm Units	License Number			Date 6/4			
From 10 Description Amount		Signed MELY	AN BIGSBY (	E-filed) M	ichael Ap	plebee #202	3	
		Contact Info (op	tional)	an	nended 6/	22/20		
ORIGINAL - WATER RE	SOURCES	L EPARTMENT						
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES	S DEPARTM	MENT WITHIN 30	DAYS OF CO	MPLETION	OF WO	RK Form V	ersion:	