



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.

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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).
- Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- Groundwater registration modification fees – Amount enclosed: \$ 1,250. (\$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.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

(For Staff Use Only)

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

<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: / /

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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.

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- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads and railroads.
- Major water delivery system features from the point(s) of appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes hachuring, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the registration is being changed, a separate hachuring is needed for the portion of the registration left unchanged.
- N/A If you are proposing a modification in place of use, show the proposed place of use with hachuring including priority date and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of appropriation with distance and bearing or coordinates from a recognized survey corner.
- N/A If you are proposing a modification in point(s) of appropriation, show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

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Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Case Family LLC		PHONE NO. (541) 979-6236	ADDITIONAL CONTACT NO.
ADDRESS 33010 Dever Conner Rd. NE		FAX NO.	
CITY Albany	STATE OR	ZIP 97321	E-MAIL billcasefarms@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

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

APPLICANT/BUSINESS NAME Will McGill Surveying LLC		PHONE NO. (503) 510-3026	ADDITIONAL CONTACT NO. (503) 931-0210
ADDRESS 15333 Pletzer Rd. SE		FAX NO.	
CITY Turner	STATE OR	ZIP 97392	E-MAIL willmcgill.surveying@gmail.com
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this modification; and why:
It is proposed to move GR 1703 from TL 2200 (Perlenfein) to TL 700 (Case) for use from Wells 1-4.

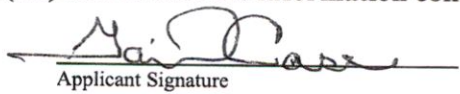
Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal stimulus dollars)

(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: Albany Democrat-Herald.

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


Gail Case
02/12/2021
 Applicant Signature Print Name (and Title if applicable) Date
 _____ _____ _____
 Applicant Signature Print Name (and Title if applicable) Date

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located? Yes No *If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has been conveyed.*

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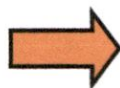
Check the appropriate box, if applicable:

Check here if the Groundwater registration proposed for modification is or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

Check here if water for the Groundwater registration is supplied under a water service agreement or other contract with a federal agency or other entity.

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP



To meet State Land Use Consistency Requirements, you must list all local governments (each county, city, municipal corporation, or tribal government) within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME Linn County	ADDRESS 300 SW 4th Ave.	
CITY Albany	STATE OR	ZIP 97321

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Part 4 of 4 – Groundwater Registration Information

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CERTIFICATE OF REGISTRATION # GR 1703

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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.)

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POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Pump Well	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LINN 4816	10	S	3	W	16	SW	SE	2200	660' N and 3820' E of SW corner of sec. 16
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 4614	10	S	3	W	8	SW	NE	700	N 61° 30' W 41 chains from SE corner of NE ¼ of sec. 8
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 4613	10	S	3	W	8	SW	NE	700	N 75° 10' W 39 chains from SE corner of NE ¼ of sec. 8
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 4619	10	S	3	W	8	NW	SE	700	S 81° 05' W 38.25 chains from NE corner of SE ¼ of sec. 8
Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 4615	10	S	3	W	8	SW	NE	700	N 68° 20' W 26 chains from SE corner of NE ¼ of sec. 8

*

Check all type(s) of modifications(s) proposed below (modification "CODES" are provided in parentheses):

- | | |
|--|---|
| <input checked="" type="checkbox"/> Place of Use (POU) | <input checked="" type="checkbox"/> Point of Appropriation (well) (POA) |
| <input type="checkbox"/> Character of Use (USE) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |

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

- Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.
- No Complete all of Table 2 to describe the portion of the registration to be changed.

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Table 2. Description of Modifications to Registration GR-1703 (Certificate # GR-1652)

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)										PROPOSED (the "to" or "on" 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.										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				
EXAMPLE																									
2	S	9	E	15	NE	NW	100	Irrigation	POD #1	1901	2	S	9	E	1	NW	NW	500	1	10.0	POD #5	1901			
"	"	"	"	"	"	"	"	EXAMPLE	POD #2	"	2	S	9	E	2	SW	NW	500		5.0	POD #6	1901			
											10	S	3	W	8	NW	SE	700	3.5	Irrigation	Well 1, 2, 3, 4	1951			
							TOTAL ACRES				TOTAL ACRES							3.5							

Additional remarks: *The location description from the registration statement does not coincide with the mapped location of Pump Well authorized for GR 1703. The well should be on the same property (TL 2200) as the place of use. A redscribed location is shown on the FROM map.

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Groundwater Registration # GR-1703 (Certificate # GR-1652)

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:



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:

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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.

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(Tip: You may search for well logs on the Department’s web page at:

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

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AND/OR

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

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



After recording return to:

Case Family LLC
33010 Dever Conner Rd. NE
Albany, OR 97321

I, Steve Druckenmiller, County Clerk for Linn County, Oregon, certify that the instrument identified herein was recorded in the Clerk records.

Steve Druckenmiller - County Clerk



WATER RIGHT CONVEYANCE AGREEMENT

Edward R. Perlenfein, Trustee of the Edward R. Perlenfein Trust under agreement dated August 15, 2012, Grantor, release and quitclaim to Case Family LLC, an Oregon Corporation, Grantee, all right, title and interest in and to the water right (Groundwater Registration No. GR-1703, Certificate No. GR-1652) appurtenant to the real property as described in Linn County Recorded Deed 2012-12928.

Payment: The true consideration for this conveyance is \$ 4,200.⁰⁰/₁₀₀

Payment Contingency: Payment by Grantee shall be contingent on approval by the Oregon Water Resources Department of Grantee's Groundwater Registration Modification Application. Should the modification be denied by final agency order, including after exhaustion of any right of appeal, the Agreement shall be terminated and no conveyance of the Water Right (Groundwater Registration No. GR-1703, Certificate No. GR-1652) shall occur.

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BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON TRANSFERRING FEE TITLE SHOULD INQUIRE ABOUT THE PERSONS RIGHTS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010. THIS INSTRUMENT DOES NOT ALLOW USE OF THE PROPERTY DESCRIBED IN THIS INSTRUMENT IN VIOLATION OF APPLICABLE LAND USE LAWS AND REGULATIONS. BEFORE SIGNING OR ACCEPTING THIS INSTRUMENT, THE PERSON ACQUIRING FEE TITLE TO THE PROPERTY SHOULD CHECK WITH THE APPROPRIATE CITY OR COUNTY PLANNING DEPARTMENT TO VERIFY THAT THE UNIT OF LAND BEING TRANSFERRED IS A LAWFULLY ESTABLISHED LOT OR PARCEL, AS DEFINED IN ORS 92.010 OR 215.010, TO VERIFY THE APPROVED USES OF THE LOT OR PARCEL, TO DETERMINE ANY LIMITS ON LAWSUITS AGAINST FARMING OR FOREST PRACTICES, AS DEFINED IN ORS 30.930, AND TO INQUIRE ABOUT THE RIGHTS OF NEIGHBORING PROPERTY OWNERS, IF ANY, UNDER ORS 195.300, 195.301 AND 195.305 TO 195.336 AND SECTIONS 5 TO 11, CHAPTER 424, OREGON LAWS 2007, SECTIONS 2 TO 9 AND 17, CHAPTER 855, OREGON LAWS 2009, AND SECTIONS 2 TO 7, CHAPTER 8, OREGON LAWS 2010.

Dated this 11 day of Feb., 2021.

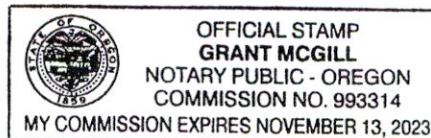
Edward R. Perlenfein
Edward R. Perlenfein (Trustee), Grantor

State of Oregon
County of Linn

This instrument was acknowledged before me on Feb. 11, 2021 by Edward R. Perlenfein as owner.

Grant McGill
(Notary Public for Oregon)

My commission expires 11/13/23.



**Application for Water Right
Transfer
Consent by Deeded Landowner**



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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State of Oregon)
)ss
County of Linn)

I Edward R. Perlenfein in my capacity as Owner,
mailing address 2910 NE Alexander Ln., Albany, OR 97321,
telephone number (541) 979-5767, duly sworn depose and say that I
consent to the proposed change(s) to ~~Water Right Certificate Number~~ Groundwater Registration
Number 1703
described in a Transfer Application (T-_____) submitted by Case Family LLC,
(transfer number, if known)
on the property in tax lot number(s) 2200, Section 16, Township 10
South, Range 3 West, W.M., located at 6405 NE Old Salem Rd., Albany, OR 97321.
(site address)

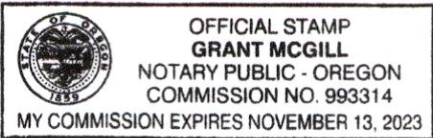
Ed Perlenfein
Signature of Affiant

2-11-21
Date

Signature of Affiant

Date

Subscribed and Sworn to before me this 11 day of Feb., 2021.



Grant McGill
Notary Public for Oregon

My commission expires 11/13/23.

Business Registry Business Name Search

[New Search](#)

Business Entity Data

02-09-2021

13:27

Registry Nbr	Entity Type	Entity Status	Jurisdiction	Registry Date	Next Renewal Date	Renewal Due?
524071-95	DLLC	ACT	OREGON	05-30-2008	05-30-2021	
Entity Name	CASE FAMILY, LLC					
Foreign Name						

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[New Search](#)

Associated Names

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Type	PRINCIPAL PLACE OF BUSINESS					
Addr 1	33010 DEVER-CONNER RD NE					
Addr 2						
CSZ	ALBANY	OR	97321	Country	UNITED STATES OF AMERICA	

Please click [here](#) for general information about registered agents and service of process.

Type	AGT REGISTERED AGENT			Start Date	04-30-2015	Resign Date
Name	WILLIAM	COLEMAN	CASE			
Addr 1	33010 DEVER CONNER RD NE					
Addr 2						
CSZ	ALBANY	OR	97321	Country	UNITED STATES OF AMERICA	

Type	MAL MAILING ADDRESS					
Addr 1	33010 DEVER CONNER RD NE					
Addr 2						
CSZ	ALBANY	OR	97321	Country	UNITED STATES OF AMERICA	

Type	MEM MEMBER			Resign Date
Not of Record	THE WILLIAM C. CASE REVOCABLE LIVING TRUST DTD 5-21-1993			
Addr 1	33010 DEVER-CONNER RD NE			
Addr 2				
CSZ	ALBANY	OR	97321	Country UNITED STATES OF AMERICA

Type	MEM MEMBER			Resign Date
Not of Record	THE GAIL K. CASE REVOCABLE LIVING TURST DTD 5-21-1993			
Addr 1	33010 DEVER-CONNER RD NE			
Addr 2				
CSZ	ALBANY	OR	97321	Country UNITED STATES OF AMERICA

Type	MEM MEMBER			Resign Date
Name	WILLIAM	COLEMAN	CASE	
Addr 1	33010 DEVER CONNER RD NE			
Addr 2				
CSZ				Country 13626



Phone: (503) 986-2200
Fax: (503) 378-4381

Articles of Amendment/Dissolution—Limited Liability Company

Secretary of State
Corporation Division
255 Capitol St. NE, Suite 151
Salem, OR 97310-1327
FilingInOregon.com

Check the appropriate box below:

- ARTICLES OF AMENDMENT
(Complete only 1, 2, 3, 6, 7)
- ARTICLES OF DISSOLUTION
(Complete only 4, 5, 6, 7)

REGISTRY NUMBER: 524071-95

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record.
We must release this information to all parties upon request and it will be posted on our website.

Please Type or Print Legibly in Black Ink. Attach Additional Sheet if Necessary.

For office use only

ARTICLES OF AMENDMENT ONLY

1) ENTITY NAME

CASE FAMILY, LLC

2) THE FOLLOWING AMENDMENT(S) TO THE ARTICLES OF ORGANIZATION IS MADE HEREBY. (State the article number(s) and set forth the article(s) as it is amended to read.)

Article VI: The names and addresses of the owners/members are:

The William C. Case Revocable Living Trust dated May 21, 1993; and

The Gail K. Case Revocable Living Trust dated May 21, 1993

33010 Dever-Conner Rd. NE

Albany, OR 97321

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3) PLEASE CHECK THE APPROPRIATE STATEMENT

This amendment was adopted by the manager(s) without member action. Member action was not required.

Date of adoption of each amendment: 06/01/2008

This amendment(s) was approved by the members. _____ percent of the members approved the amendment(s).

Date of adoption of each amendment: _____

ARTICLES OF DISSOLUTION ONLY

4) NAME OF LIMITED LIABILITY COMPANY _____

5) DATE OF DISSOLUTION _____

6) EXECUTION (Must be signed by at least one member or manager.)

Signature

William C. Case
Gail K. Case

Printed Name

William C. Case, Trustee

Gail K. Case, Trustee

Title

Operating Manager

Partner

7) CONTACT NAME (To resolve questions with this filing.)

Andrew S. Noonan

DAYTIME PHONE NUMBER (Include area code.)

(541) 926-5504

FEEES

Required Processing Fee \$50
Confirmation Copy (Optional) \$5

Processing Fees are nonrefundable.

Please make check payable to
"Corporation Division."

NOTE:

Fees may be paid with VISA or MasterCard. The card number and expiration date should be submitted on a separate sheet for your protection.

STATE ENGINEER
Salem, Oregon

LINN
4816

Well Record

GR- 1652

Pump well

STATE WELL NO. 10/3W-160
COUNTY Linn
APPLICATION NO. GR-1703

OWNER: J. H. Lyon

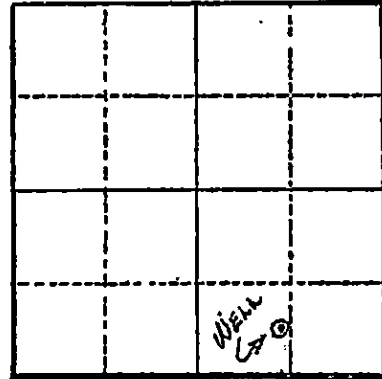
MAILING ADDRESS: Rt. 2, Box 408

LOCATION OF WELL: Owner's No.

CITY AND STATE: Albany, Oregon

SW 1/4 SE 1/4 Sec. 16 T. 10 S. R. 3 W., W.M.

Bearing and distance from section or subdivision corner 660' N. & 3820' E. from SW cor. Sec. 16



Section 16

Altitude at well 220'

TYPE OF WELL: Drilled Date Constructed 1951

Depth drilled 30' Depth cased 30'

CASING RECORD:

6"

FINISH:

Slot perforations from 20 to 30 ft.

AQUIFERS:

WATER LEVEL:

10'

PUMPING EQUIPMENT: Type Sears jet H.P. 3

Capacity 30 G.P.M.

WELL TESTS:

Drawdown ft. after hours G.P.M.

Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F. 19.

SOURCE OF INFORMATION GR Record

DRILLER or DIGGER Bill Hamilton

ADDITIONAL DATA:

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

REMARKS:

Irrigation of 3.5 acres.

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STATE ENGINEER
Salem, Oregon

LINN
4614

Well Record

Well 1

STATE WELL NO. 10/3W - 8G
COUNTY LINN
APPLICATION NO. GR-2286

OWNER: M. C. Case

MAILING ADDRESS:

Rt. 2, Box 393

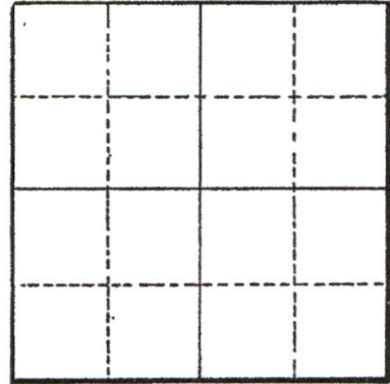
LOCATION OF WELL: Owner's No. No. 1

CITY AND STATE:

Albany, Oregon

SW 1/4 NE 1/4 Sec. 8 T. 10 N. S. R. 3 E. W., W.M.

Bearing and distance from section or subdivision corner N. 61° 30' W. 41 chains from SE corner.



Section _____

Altitude at well _____

TYPE OF WELL: Drilled Date Constructed 1946

Depth drilled 22 Depth cased 22

CASING RECORD:

8-inch

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FINISH:

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Perforations from 15 to 22

AQUIFERS:

WATER LEVEL:

7-feet

PUMPING EQUIPMENT: Type Fairbanks Morse 2" Centrifugal H.P. 10
Capacity 300 G.P.M.

WELL TESTS:
Drawdown 4 ft. after _____ hours Pumping 400 G.P.M.
Drawdown _____ ft. after _____ hours _____ G.P.M.

USE OF WATER Irrigation Temp. _____ °F. _____, 19____

SOURCE OF INFORMATION GR-2179
DRILLER or DIGGER T. J. Burkhart, 1235 W. 15th St., Albany, Oregon

ADDITIONAL DATA:

Log _____ Water Level Measurements _____ Chemical Analysis _____ Aquifer Test _____

REMARKS:

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STATE ENGINEER
Salem, Oregon

LINN
4613

Well Record

Well 2

STATE WELL NO. 10/3W - 8G
COUNTY LINN
APPLICATION NO. GR-2287

OWNER: M. C. Case

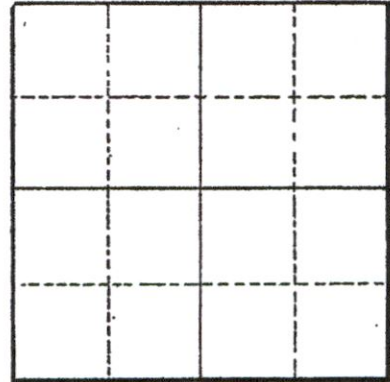
MAILING ADDRESS: Rt. 2, Box 393,

LOCATION OF WELL: Owner's No. No. 2

CITY AND STATE: Albany, Oregon

SW 1/4 NE 1/4 Sec. 8 T. 10 N. S., R. 3 E. W., W.M.

Bearing and distance from section or subdivision corner N. 75° 10' W. 39 chains from SE corner.



Altitude at well

TYPE OF WELL: Drilled Date Constructed 1945

Depth drilled 22 Depth cased 22

Section

CASING RECORD:

8-inch

RECEIVED

FEB 16 2021

OWRD

FINISH:

Perforations from 15 to 22

AQUIFERS:

WATER LEVEL:

7-feet

PUMPING EQUIPMENT: Type Fairbanks Morse 3" Centrifugal H.P. 15
Capacity 350 G.P.M.

WELL TESTS:

Drawdown ft. after hours Pumping 400 G.P.M.
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F. 19

SOURCE OF INFORMATION GR-2180
DRILLER or DIGGER T. J. Burkhart, 1235 W. 15th., Albany, Oregon

ADDITIONAL DATA:

Log Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

13626

STATE ENGINEER
Salem, Oregon

LINN
4619

Well Record

Well 3

STATE WELL NO. 10/3W - 8K
COUNTY LINN
APPLICATION NO. GR-2288

OWNER: M. C. Case

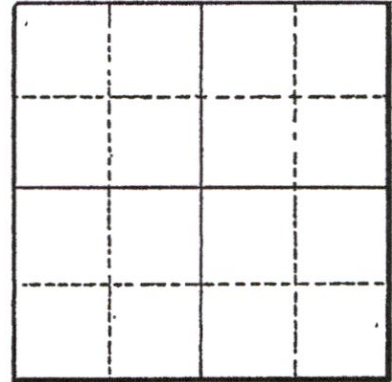
MAILING ADDRESS: Rt. 2, Box 393

LOCATION OF WELL: Owner's No. #3

CITY AND STATE: Albany, Oregon

NW 1/4 SE 1/4 Sec. 8 T. 10 N. S., R. 3 W., W.M.

Bearing and distance from section or subdivision corner S. 81° 05' W. 38.25 chains.



Altitude at well

TYPE OF WELL: Driven Date Constructed 1941

Depth drilled 25 Depth cased 25

Section

CASING RECORD:

4-inch

RECEIVED

FEB 16 2021

OWRD

FINISH:

Perforations from 16 to 25

AQUIFERS:

WATER LEVEL:

9-feet

PUMPING EQUIPMENT: Type 3" Centrifugal H.P.
Capacity 300 G.P.M.

WELL TESTS:

Drawdown 10 ft. after hours Pumping 300 G.P.M.
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F., 19

SOURCE OF INFORMATION GR-2183

DRILLER or DIGGER M. C. Case, Rt. 2, Box 393, Albany, Oregon

ADDITIONAL DATA:

Log Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

13626

STATE ENGINEER
Salem, Oregon

LINN
4615

Well Record

well 4

STATE WELL NO. 10/3W - 8G
COUNTY LINN
APPLICATION NO. GR-2289

OWNER: M. G. Case

MAILING ADDRESS:

Rt. 2, Box 383

LOCATION OF WELL: Owner's No. #4

CITY AND STATE:

Albany, Oregon

SW 1/4 NE 1/4 Sec. 8 T. 10 N. S., R. 3 E. W., W.M.

Bearing and distance from section or subdivision corner N. 68° 20' W. 26 chains.

RECEIVED

FEB 16 2021

Altitude at well

TYPE OF WELL: Drilled Date Constructed 1951

Depth drilled 22 Depth cased 22

Section

CASING RECORD:

8-inch

OWRD

FINISH:

Perforations from 14 to 22

AQUIFERS:

WATER LEVEL:

7-feet

PUMPING EQUIPMENT: Type Fairbanks Morse 2" Centrifugal H.P. 10
Capacity 250 G.P.M.

WELL TESTS:

Drawdown 5 ft. after hours Pumping 400 G.P.M.
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F. 19

SOURCE OF INFORMATION GR-2184

DRILLER or DIGGER Nicholas Klaus, Rt. 4, Albany, Oregon

ADDITIONAL DATA:

Log Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

13626