



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

Application for Permit Amendment

Part 1 of 5 – Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

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Check all items included with this application. (N/A = Not Applicable)

- ☒ Part 1 – Completed Minimum Requirements Checklist.
- ☒ Part 2 – Completed Application Map Checklist.
- ☒ Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at:
http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator. If you have questions, call Customer Service at (503) 986-0801.
- ☒ Part 4 – Completed Applicant Information and Signature.
- ☒ Part 5 – Information about Permits to be Amended: **Number of permits to be amended:** 1
List the Permits here: G-15999
Please include a separate Part 5 for each permit. (See instructions on page 6)
- ☒ Completed Permit Amendment Application Map (Does not have to be prepared by a Certified Water Right Examiner).
- ☐ ☒ N/A Request for Assignment Form and statutory fee. The request for assignment form has to be completed if the applicant is **not** the permit holder of record and needs to be assigned to the permit; **or** the landowner of the proposed place of use is **not** the permit holder of record and needs to be assigned to the permit (the Request for Assignment Form is available online at <https://www.oregon.gov/OWRD/Forms/Pages/default.aspx>). Assignment is not needed if the applicant is the permit holder of record.
- ☐ ☒ N/A Affidavit(s) of Consent are required from all permit holder(s) of record if the permit is not assigned to the applicant **or** other permit holders of record that are not listed as applicants.
- ☐ ☒ N/A Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- ☒ ☐ N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- ☐ ☒ N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500 feet from the surface water source and more than 1000 feet upstream or downstream from the point of diversion. (ORS 540.531(2) or (3)).

(For Staff Use Only)

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

___ Application fee not enclosed/insufficient
___ Land Use Form not enclosed or incomplete
___ Additional signature(s) required

___ Map not included or incomplete

___ Part ___ is incomplete

Other/Explanation _____

Staff: _____ 503-986-0 _____

Date: ____/____/____

Part 2 of 5 – Permit Amendment Map Checklist

Your permit amendment application will be returned if any of the map requirements listed below are not met.

Please be sure that the map you submit includes all the items listed below and meets the requirements of OAR 690-380-3100, however, the map does not have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

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

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Part 3 of 5 – Fee Worksheet

FEE WORKSHEET for PERMIT AMENDMENT			
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,160
2	Types of change proposed: ☒ Place of Use ☒ Point of Diversion/Appropriation Number of above boxes checked = <u>2</u> (2a) Subtract 1 from the number in line 2a = <u>1</u> (2b) <i>If only one change, this will be 0</i> Multiply line 2b by \$930 and enter » » » » » » » » » » » » » » » »	2	930
3	Number of permits included in Permit Amendment <u>1</u> (3a) Subtract 1 from the number in 3a: <u>0</u> (3b) <i>If only one permit this will be 0</i> Multiply line 3b by \$520 and enter » » » » » » » » » » » » » » » »	3	0
4	Do you propose to add or change a well, or change from a surface water POD to a well? ☐ No: enter 0 » ☒ Yes: enter \$410 »	4	410
5	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*): <u>0.04</u> (5a) Subtract 1.0 from the number in 5a above: <u>0</u> (5b) If 5b is 0, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$350, then enter on line 5 » » » » » » » » » » » » » » » »	5	0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	
7	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 » If no box is applicable, enter 0 on line 7 » » » » » » » » » » » » » » » »	7	
8	Subtract line 7 from line 6 » » » » » » » » » » Permit Amendment Fee:	8	2,500

*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:

- For irrigation calculate cfs for each permit involved as follows:
 - Divide total authorized cfs by total acres in the permit (for S-12345, $1.25 \text{ cfs} \div 100 \text{ ac}$); then multiply by the number of acres to be changed to get the application cfs ($x 45 \text{ ac} = 0.56 \text{ cfs}$).
 - 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, $45.0 \text{ ac} \times 0.0125 \text{ cfs/ac} = 0.56 \text{ cfs}$)
- 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).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Alfred Sennhauser		PHONE NO. 541 761 8760	ADDITIONAL CONTACT NO.
ADDRESS 1394 Evergreen Ln		FAX NO.	
CITY Ashland	STATE OR	ZIP 97520	E-MAIL freddy.sennhauser@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.			

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

AGENT/BUSINESS NAME		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS		FAX NO.	
CITY	STATE	ZIP	E-MAIL
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.			

Explain in your own words what you propose to accomplish with this permit amendment; and why:

Please see attachment 1

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

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

Is the applicant the permit holder of record? ☒ Yes ☐ No

If NO, include either:

- ☐ A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit to the applicant(s), **OR**
- ☐ An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

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

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

If NO, what are the completion dates of the permit(s)? **10.1.2021**

- 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: **Medford Mail Tribune.**

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

Alfred Sennhauser
Applicant Signature

Alfred Sennhauser
Print Name (and Title if applicable)

3/25/2021
Date

Lisa Sennhauser - Jeff
Applicant Signature

LISA SENNHÄUSER - JEFF
Print Name (and Title if applicable)

4/27/2021
Date

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Check one of the following:

- ☐ The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- ☒ The permit holder(s) of record will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record.

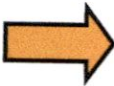
Check the appropriate box, if applicable:

- ☐ Check here if any of the permits proposed for amendment are or will be located within or served by an irrigation or other water district.

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

- ☐ Check here if water for any of the permits supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME	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 Jackson County	ADDRESS 10 S. Oakdale Ave	
CITY Medford	STATE Oregon	ZIP 97501

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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Attachment 1

A lot of time has expired since the original permit application was submitted in 2005. In the meantime, newer water-wise technologies have constantly emerged that allow for different farming approaches and options.

This permit amendment is required due to:

- environmental factors
- changes of farming practices
- changes of crop suitability
- some inaccuracies on the original map
- the addition of a new point of diversion (well) due to severely reduced production of the previously permitted well
- deletion of two points of use (totaling 1 acre), and the consequential change (enlargement) of an existing point of use

The new (enclosed) map is created with more accurate measurements due to smartphone technology, which was not available at the time the original application was filed. The enclosed map #2 shows the changes with respect of the points of use and the reservoir.

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Part 5 of 5 – Water Use Permit Information

Please use a separate Part 5 for each permit being changed. See instructions on page 6, to copy and paste additional Part 5s, or to add additional rows to tables within the form.

PERMIT # 6-15999

Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

POD/POA Name or Number	Is this POD/POA Authorized by the permit or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-)	Twp	Rng	Sec	¼ ¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well #1	☒ Authorized ☐ Proposed	Jack 56625	38.00S	1.00E	26	SW SW	101	885' N / 180' E
Well #2	☐ Authorized ☒ Proposed	Jack 64315	38.00S	1.00E	27	NE SE	101	31' S / 41' W
	☐ Authorized ☐ Proposed							
	☐ Authorized ☐ Proposed							

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

- | | |
|--|--|
| ☒ Place of Use (POU) | ☒ Point of Appropriation/Well (POA) |
| ☐ Point of Diversion (POD) | ☒ Additional Point of Appropriation (APOA) |
| ☒ Additional Point of Diversion (APOD) | ☐ Surface water POD to Ground Water POA (SW/GW) |

Will all of the proposed changes affect the entire water use permit?

- ☒ Yes Complete only the proposed ("to" lands) section of Table 2 on the next page. Use the "CODES" listed above to describe the proposed changes.

- ☐ No Complete all of Table 2 to describe the portion of the permit to be changed.

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For a change in place of use:

Does the permit holder of record own or control the land TO which the place of use is being moved?

- ☒ Yes ☐ No

If NO, the landowner of the land TO which the place of use is being moved must be assigned to the permit as a permit holder of record by submitting a completed Request for Assignment form and the required statutory fee for an assignment.

Is the proposed place of use contiguous to the authorized place of use? ☒ Yes ☐ No

The permitted place of use can be moved only to lands that are contiguous to the authorized place of use unless the change to non-contiguous lands is in furtherance of mitigation or conservation efforts undertaken for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to 496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

Do you have questions about how to fill-out the tables?
Contact the Department at 503-986-0900 and ask for Transfer Staff.

95

List the change proposed for the acreage in each $\frac{1}{4}$. 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.

[illegible]

Additional remarks: _____

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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: _____

 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
Well #1	Yes	Jack 56626	221	6(in)	1.5-58.5	53.5-58.5		127	Br. Rock	4 gpm
Well #2	Yes	Jack 64315	340	6(in) 4(in)	1-160 0-340	0-20	280-300 300-340	115	limestone	12 gpm

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STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765 & OAR 690-205-0210)

JACK 64315

WELL I.D. LABEL# L133499

START CARD # 1046341

ORIGINAL LOG #

2/20/2020

(1) LAND OWNER

Owner Well I.D.

First Name FREDDIE Last Name SENNHAUSER

Company

Address 1710 EAST NEVADACity ASHLAND State OR Zip 97520

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Conversion☐ Alteration (complete 2a & 10) ☐ Abandonment (complete 5a)

(2a) PRE-ALTERATION

Casing: Dia + From To Gauge Stl Plstc Wld Thrd

Material From To Amt sacks/lbs

Seal:

(3) DRILL METHOD

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger ☐ Cable Mud☐ Reverse Rotary ☐ Other

(4) PROPOSED USE

☒ Domestic ☐ Irrigation ☐ Community☐ Industrial/ Commercial ☐ Livestock ☐ Dewatering☐ Thermal ☐ Injection ☐ Other

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)Depth of Completed Well 340.00 ft.

BORE HOLE

Dia	From	To	Material	SEAL	From	To	Amt	sacks/
12	0	20	Bentonite Chips	0	20	16	P	
8	20	160		Calculated		14		
6	160	365		Calculated				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E☒ Other DRY POURED

Backfill placed from _____ ft. to _____ ft. Material _____

Filter pack from _____ ft. to _____ ft. Material _____ Size _____

Explosives used: ☐ Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount

Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
☒	☒	6	☒	1	160	.250	☒	☒	☒	☒
☐	☐	4	☐	0	340	sch 40	☐	☐	☐	☒

Shoe ☐ Inside ☐ Outside ☒ Other Location of shoe(s) 160Temp casing ☐ Yes Dia _____ From _____ To _____

(7) PERFORATIONS/SCREENS

Perforations Method Saw-cut and factory laser

Screens Type _____ Material _____

Perf/	Casing/	Screen	Dia	From	To	Scr/slot	Slot	# of	Tele/
Screen	Liner					width	length	slots	pipe size
Perf	Liner	4	280	300	.032	2	3200	4	
Perf	Liner	4	300	340	.175	6	24	4	

(8) WELL TESTS: Minimum testing time is 1 hour

☐ Pump ☐ Bailer ☒ Air ☐ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
12		364	5

Temperature 55 °F Lab analysis ☐ Yes By _____Water quality concerns? ☐ Yes (describe below) TDS amount 204 ppm

From	To	Description	Amount	Units

(9) LOCATION OF WELL (legal description)

County JACKSON Twp 38.00 S N/S Range 1.00 E E/W WMSec 27 NE 1/4 of the SE 1/4 Tax Lot 101

Tax Map Number _____ Lot _____

Lat _____ " or 42.23662993 DMS or DDLong _____ " or -122.67906702 DMS or DD☒ Street address of well ☐ Nearest address1710 EAST NEVADA, ASHLAND, OR 97520

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration				
Completed Well	<u>2/20/2020</u>			<u>115</u>

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES

Depth water was first found 250.00

SWL Date From To Est Flow SWL(psi) + SWL(ft)

<u>2/20/2020</u>	<u>250</u>	<u>300</u>	<u>12</u>	<u>120</u>

(11) WELL LOG

Ground Elevation _____

Material	From	To
Clay brown	0	6
Brown rock, Sandstone Cosolidated	6	66
Brecia, Basalt Gravel	66	85
Tuff, dark, crystalline	85	150
Sandstone, Blue grey hard	150	285
Volcanic black rock, fine grain, hard	285	305
Tuff, Hard, limestone like	305	345
Sandstone, dark, fine grain	345	365

Date Started 2/19/2020 Completed 2/20/2020

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or 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.

License Number _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

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 and belief.

License Number 1798 Date 2/20/2020Signed GARY NEWMAN (E-Filed)Contact Info (optional) South Oregon Well Drilling Inc. 541-772-1177

ORIGINAL - WATER RESOURCES DEPARTMENT

THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

WATER SUPPLY WELL REPORT - Map with location identified must be attached and shall include an approximate scale and north arrow

JACK 64315

2/20/2020

Map of Hole

STATE OF OREGON WELL LOCATION MAP

This map is supplemental to the WATER SUPPLY WELL REPORT

Oregon Water Resources Department
725 Summer St NE, Salem OR 97301
(503) 986-0900



LOCATION OF WELL

Latitude: 42.23662993 Datum: WGS84

Longitude: -122.67906702

Township/Range/Section/Quarter-Quarter Section:

WM38.00S1.00E27NESE

Address of Well:

1710 EAST NEVADA, ASHLAND, OR 97520

Well Label: 133499

Printed: February 20, 2020

DISCLAIMER: This map is intended to represent the approximate location the well. It is not intended to be construed as survey accurate in any manner.

Provided by well constructor



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WATER RESOURCES DEPT
SALEM, OREGON

JACK
56626

Amended 5/04/05 by Fred Krasner

STATE OF OREGON
WATER SUPPLY WELL REPORT
(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

WELL I.D. # L 67139
START CARD # 158683

(1) LAND OWNER
Name FREDDY SENNAHAUSER Well Number _____
Address 1710 E. NEVADA
City ASHLAND State OR Zip 97520

(2) TYPE OF WORK: State OR Zip 97522
☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:

(3) DRILL METHOD: ☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other _____

(4) PROPOSED USE:
☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other

(5) BORE HOLE CONSTRUCTION

(5) BORE HOLE CONSTRUCTION:
Special Construction approval ☐ Yes ☒ No Depth of Completed Well 221 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____
BORE HOLE _____

Diameter		From		To	Material	From		To	Sacks or pounds
10"	0	37	85R	Ches	53 1/2	55 1/2	2 SACKS		
8"	37	58 1/2	"	"	0	37	19 SACKS		
6"	58 1/2	72 1/2							

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
 Other POURED DRY

Backfill placed from _____ ft to _____ ft. Material _____
Gravel placed from _____ ft to _____ ft. Size of gravel _____
(6) CASING/LINED _____

(6) CASING/LINER: _____ ft. Size of gravel: _____

	Diameter	Feet	In	Gauge	Steel	Plastic	Weight	Threaded
Casing:	6	+112	58 1/4	250	M	☐	☒	☒

Casing:	Diameter	Prop.	Tu	Gauge	Steel	Plastic	Weighted	Threaded
	6	+1	1/2	58	1/2 .250	☒	☒	☐
						☐	☐	☐
						☐	☐	☐
						☐	☐	☐
Liner:						☐	☐	☐
						☐	☐	☐
						☐	☐	☐
						☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ None

Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS: SA 72
☐ Perforations Method _____
☐ Screens _____

Type		Material					
From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Inner
						11	11
						11	11
						11	11
						11	11

(8) WELL TESTS. ME-

(8) WELL TESTS: Minimum testing time is 1 hour

☐ Pump ☐ Bailor

☐ Pump	☐ Bailor	☒ Air	☐ Flowing
Yield gal/min	Drawdown	Drill stem at	Time
25		221	1 hr.

Temperature of water 58° Depth Artesian Flow Found _____
 Was a water analysis done? ☐ Yes By whom _____
 Did any strata contain water not suitable for intended use?
☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Too little
 Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County JACKSON Latitude _____
Township 38S N or S Range 1E Longitude _____
Section 26 SW 1/4 E or W, WM. _____
Tax Lot 101 Lot _____ Sub 1/4 SW 1/4
Street Address of Well (or nearest address) _____ Subdivision Sec. 26, Twp. 38S, R. 1E

(10) STATIC WATER LEVEL:
 — 127 — ft. below land surface.
 Artesian pressure _____ lb. per square inch

Date 2-7-04

(11) WATER BEARING ZONES: _____ lb. per square inch Date: _____
 Depth at which water was first found: SEE PAGE 27

From	To	Estimated Flow Rate	SWL
190	201	25	127

(12) WELL LOG:

(12) WELL LOG: _____
Ground Elevation _____

Material	From	To	SWL
CLAY BROWN STICKY	0	3	
ROCK DARK BROWN	3		
WENTHERGD 3-6		22	
VOLCANIC GREY & BRN MIX	22	35	
GREY	35	51	
BLACK w/ WH GR2	51	54	
GREY & BRN	54	57	
GREY	57	76	
DARK GREY	76	89	
SANDSTONE LIGHT GREY	89	113	
VOLCANIC DARK GREY	113		
CRVICE W/ BROWN			
ROCK 190-194		221	127
LEAVE PUMP ABOVE			
190 FT.			

Date started 2-6-04

Date started 2-6-04 Completed 2-7-04
(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, alteration, or 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.

Signed Frank K... Date 2-7-04
(banded) Water Well Construction 4

I accept responsibility for the construction, 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 and correct.

Signed Frank K... WWC Number 796 Date 3-7-04

REC JACK 56626

MAR 15 2004

STATE OF OREGON
WATER SUPPLY WELL REPORT

(as required by ORS 537.765)

Instructions for completing this report are on the last page of this form.

WATER RESOURCES DEPT
SALEM, OREGONWELL I.D. # L 67139
START CARD # 158683

(1) LAND OWNER Name FREDDY SENNA HAUSER Well Number _____
Address 1710 E. NEVADA
City ASHLAND State OR Zip 97520

(2) TYPE OF WORK

☒ New Well ☐ Deepening ☐ Alteration (repair/recondition) ☐ Abandonment

(3) DRILL METHOD:

☒ Rotary Air ☐ Rotary Mud ☐ Cable ☐ Auger
☐ Other _____

(4) PROPOSED USE:

☒ Domestic ☐ Community ☐ Industrial ☐ Irrigation
☐ Thermal ☐ Injection ☐ Livestock ☐ Other _____

(5) BORE HOLE CONSTRUCTION:

Special Construction approval ☐ Yes ☒ No Depth of Completed Well 221 ft.
Explosives used ☐ Yes ☒ No Type _____ Amount _____

HOLE

SEAL

Diameter	From	To	Material	From	To	Sacks or pounds
10"	0	37	BENTONITE	53 1/2	58 1/2	2 SACKS
8"	37	58 1/2	" "	0	37	19 SACKS
6"	58 1/2	221				

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☒ Other POURED DRY

Backfill placed from _____ ft. to _____ ft. Material _____

Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 6"	+1 1/2	58 1/2	250	☒	☐	☒	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
				☐	☐	☐	☐
Liner:				☐	☐	☐	☐
				☐	☐	☐	☐

Drive Shoe used ☐ Inside ☒ Outside ☐ NoneFinal location of shoe(s) 58 1/2

(7) PERFORATIONS/SCREENS:

☐ Perforations Method _____
☐ Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						☐	☐
						☐	☐
						☐	☐
						☐	☐

(8) WELL TESTS: Minimum testing time is 1 hour

☐ Pump ☐ Bailor ☒ Air ☐ Flowing
Yield gal/min _____ Drawdown _____ Drill stem at _____ Time _____

25		221	1 hr.

Temperature of water 58° Depth Artesian Flow Found _____Was a water analysis done? ☐ Yes By whom _____Did any strata contain water not suitable for intended use? ☐ Too little☐ Salty ☐ Muddy ☐ Odor ☐ Colored ☐ Other _____

Depth of strata: _____

(9) LOCATION OF WELL by legal description:

County JACKSON Latitude _____ Longitude _____
Township 38S N or S Range 1E E or W. WM.
Section 27 NE 1/4 SE 1/4
Tax Lot 101 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 1710 E. NEVADA

(10) STATIC WATER LEVEL:

127 ft. below land surface. Date 2-7-04
Artesian pressure _____ lb. per square inch Date _____

(11) WATER BEARING ZONES:

Depth at which water was first found SEE BELOW

From	To	Estimated Flow Rate	SWL
190	201	25	127
RECEIVED			
FEB 25 2004			

WATER RESOURCES DEPT
SALEM, OREGON

Material	From	To	SWL
CLAY BROWN STICKY	0	3	
ROCK DARK BROWN	3		
WEATHERED 3-6		22	
VOLCANIC GREY & BRN MIX	22	35	
GREY	35	51	
BLACK W/WH GTZ	51	54	
GREY & BRN	54	57	
GREY	57	76	
DARK GREY	76	89	
SANDSTONE LIGHT GREY	89	113	
VOLCANIC DARK GREY	113		
CREVICE W/ BROWN			127
ROCK 190-194		221	
LEAVE PUMP ABOVE 190 FT.			

Date started 2-6-04 Completed 2-7-04

(unbonded) Water Well Constructor Certification:

I certify that the work I performed on the construction, alteration, or 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.

Signed Frank K... WWC Number 796 Date 2-7-04

(bonded) Water Well Constructor Certification:

I accept responsibility for the construction, 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 and belief.

Signed Frank K... WWC Number 796 Date 2-7-04