

Application for Permanent Water Right Transfer



Oregon Water Resources Department
725 Summer Street NE, Suite A
Salem, Oregon 97301-1266
(503) 986-0900
www.oregon.gov/OWRD

Part 1 of 5 – Minimum Requirements Checklist

This transfer 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.

RECEIVED

SEP 16 2021

OWRD

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer 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.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: 91809**
Please include a separate Part 5 for each water right. (See instructions on page 6)
NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- 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’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(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"/> Evidence of Use Form not enclosed or incomplete |
| <input type="checkbox"/> Additional signature(s) required | <input type="checkbox"/> Part ____ is incomplete |

Other/Explanation _____

Staff: _____ 503- _____ Date: ____/____/____

Part 2 of 5 – Transfer Application Map

Your transfer application will be returned if any of the map requirements listed below are **CWRE**

Please be sure that the transfer application map you submit includes all the required items and matches the existing water right map. Check all boxes that apply.

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- 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 Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), 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 right, 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 water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, 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 right certificate or 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°).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Gary Shepherd / Office of Metro Attorney		PHONE NO. 503-797-1600	ADDITIONAL CONTACT NO. 503-806-1626
ADDRESS Metro / 600 NE Grand Avenue			FAX NO.
CITY Portland	STATE OR	ZIP 97232	E-MAIL gary.shepherd@oregonmetro.gov
<p>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.</p>			

OWRD

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

AGENT/BUSINESS NAME Adam Zucker / Zucker Engineering & Design		PHONE NO. 503-956-3473	ADDITIONAL CONTACT NO.
ADDRESS 4014 SE Ankeny Street			FAX NO.
CITY Portland	STATE Or	ZIP 97214	E-MAIL adam@zuckerengineering.com
<p>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.</p>			

Explain in your own words what you propose to accomplish with this transfer application, and why:
 During attempt to inspect and maintain the pump at POD #2, the pump was not able to be pulled from the well. The concern is that casing may be failing or if the pump is pulled out of the existing well casing with too much force, the well casing will be damage beyond repair. This proposed transfer application for a newly constructed and adjacent POD is being prepared, as needed, and as a contingency if the existing POD becomes no longer serviceable or becomes damaged.

Check One Box

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I 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 affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

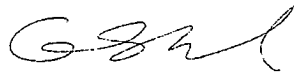
By my signature below, I confirm that I understand:

- Prior to Department approval of the transfer application, 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 water right 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: _____.
- Amendments to the application may only be made in response to the Department’s Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).
- Refunds may only be granted upon request and, as set forth in ORS 536.050(4)(a), if the Director determines that a refund of all or part of a fee is appropriate in the interests of fairness to the public or necessary to correct an error of the Department.

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

SEP 16 2021

OWRD


Applicant signature

Gary Shepherd, Office of Metro Attorney 08/30/2021
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 water right, or portion thereof, proposed for transfer 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 water right(s) were conveyed.*

Check the following boxes that apply:

- The applicant is responsible for completion of change(s). Notices and correspondence should continue to be sent to the applicant.
- The receiving landowner will be responsible for completing the proposed change(s) after the final order is issued. Copies of notices and correspondence should be sent to this landowner.
- Both the receiving landowner and applicant will be responsible for completion of change(s). Copies of notices and correspondence should be sent to this landowner and the applicant.

At this time, are the lands in this transfer application in the process of being sold? Yes No

If YES, and you know who the new landowner will be, please complete the receiving landowner information table below. If you do not know who the new landowner will be, then a request for assignment will have to be filed for at a later date.

If a property sells, the certificated water right(s) located on the land belong to the new owner, unless a sale agreement or other document states otherwise. For more information see: https://www.oregon.gov/owrd/WRDFormsPDF/Transfer_Property_Transactions.pdf

RECEIVING LANDOWNER NAME		PHONE NO.	ADDITIONAL CONTACT NO.
ADDRESS			FAX NO.
CITY	STATE	ZIP	E-MAIL
Describe any special ownership circumstances:			
The confirming Certificate shall be issued in the name of: <input type="checkbox"/> Applicant <input type="checkbox"/> Receiving Landowner			

Check here if any of the water rights proposed for transfer are or will be located within or served by an irrigation or other water district. (Tip: Complete and attach Supplemental Form D.)

IRRIGATION DISTRICT NAME	ADDRESS	
CITY	STATE	ZIP

Check here if water for any of the rights 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 county, city, municipal corporation, or tribal governments within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME City of Portland	ADDRESS 1120 SW 5th Ave.	
CITY Portland	STATE OR	ZIP 97214

ENTITY NAME County of Multnomah	ADDRESS 501 SE Hawthorn Blvd.	
CITY Portland	STATE OR	ZIP 97214

RECEIVED

SEP 16 2021

OWRD

INSTRUCTIONS for editing the Application Form

To add additional lines to tables within the forms or to copy and paste additional Part 5 pages, please **save the application form to your computer**. Unlock the document by using one of the following instructions for your Microsoft Word software version:

Microsoft Word 2003

Unlock the document by one of the following:

- Using the **Tools** menu => click **Unprotect Document**;
- OR
- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

To relock the document to enable the checkboxes to work, you will need to:

- Using the **Tools** menu => click **Protect Document**;
- OR
- Using the **Forms** toolbar => click on the **Protect/Unprotect** icon.

Microsoft Word 2007

- Unlock the document by clicking the **Review** tab, then click **Protect Document**, then click **Stop Protect**
- To relock the document, click **Editing Restrictions**, then click **Allow Only This Type of Editing**, select **Filling In Forms** from the drop-down menu, then check **Yes, Start Enforcing Protection**.

Microsoft Word 2010

- Unlock the document by clicking the **Review** tab; toggle the **Restrict Editing** icon at the upper right, then click **Stop Protect** at the bottom right. Then uncheck the "**Allow only this type of editing in the document: Filling in forms**" in the "Editing restrictions" section on the right-hand list of options.
- To relock the document, check the **Editing Restrictions/Allow Only This Type of Editing/Filling In Forms** box from the drop-down menu, then check **Yes, Start Enforcing Protection**. You do not need to assign a password for the editing restrictions.

Other Alternatives:

- Photocopy pages or tables in Part 5, ~~mark through~~ any non-applicable information, insert/attach photocopied pages to document in the appropriate location, and manually amend page numbers as necessary (e.g. Page 5 6 of 9 10).
- You may refer to additional attachments that you may include, such as separately produced tables or spreadsheets to convey large numbers of rows of place of use listings, owner/property parcels, etc. You may contact the Department at 503-986-0900 and ask for Transfer Staff if you have questions.

Once the application has been unlocked, you may:

- add additional rows to tables using the Table tools, and
- select and copy the pages of Part 5 and paste as many additional sets of Part 5 pages as needed at the end of the application.

After editing, re-lock the document to enable checkboxes to work.

Part 5 of 5 – Water Right Information

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

OWRD

CERTIFICATE # 91809

Description of Water Delivery System

System capacity: 1.56 cubic feet per second (cfs) OR _____ gallons per minute (gpm)

Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **POA #1 (west well) is a 100 HP Turbine motor powering Goulds Pump model number 9RCHC-12 Stages, and POA #2 (east well is a 50 HP Turbine motor powering a Byron Jackson Pump model number 10MO-L-8 Stages. POA #2 has a 40 HP booster pump. The water is distributed throughout the golf course through 8", 6", 4", and 2" PVC water lines to Toro 690 Series sprinklers.**

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

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate 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)
POA #1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	1234	1	N	2	E	35	SW	NE	100	90' north and 100' east of center quarter of Section 35
POA #2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	114188	1	N	2	E	36	SE	NW	200	165' north and 1,260 west of the center quarter of Section 36
Proposed POA #3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	N/A	1	N	2	E	36	SE	NW	200	140' north and 1,285 west of the center quarter of Section 36

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

- | | |
|--|---|
| <input type="checkbox"/> Place of Use (POU) | <input type="checkbox"/> Supplemental Use to Primary Use (S to P) |
| <input type="checkbox"/> Character of Use (USE) | <input checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> Substitution (SUB) |
| <input type="checkbox"/> Surface Water POD to Ground Water POA (SW/GW) | <input type="checkbox"/> Government Action POD (GOV) |

Will all of the proposed changes affect the entire water right?

- Yes Complete only the Proposed ("to" or "on" 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 water right to be changed.

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 Right Certificate # 91809

List the change proposed for the acreage in each ¼ ¼. 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.													Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.												
Twp	Rng	Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp	Rng		Sec	¼	¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/ POA(s) to be used (from Table 1)	Priority Date				
EXAMPLE																										
2	S	9	E	15	NE	NW	100	15.0	Irrigation	POD #1, POD #2	1901	POU/POD	2	S	9	E	1	NW	NW	500	1	10:0	POD #5	1901		
													2	S	9	E	2	SW	NW	500		5:0	POD #6	1901		
1	N	2	E	35	NE	SE	100	14.0	Irrigation	POA #1, POA #2	1985	POA	1	N	2	E	35	NE	SE	100		14.0	Irrigation	POA #1 POA #3	1985	
1	N	2	E	35	NW	SE	100	1.0	Irrigation	POA #1, POA #2	1985	POA	1	N	2	E	35	NW	SE	100		1.0	Irrigation	POA #1 POA #3	1985	
1	N	2	E	35	SW	SE	100	16.3	Irrigation	POA #1, POA #2	1985	POA	1	N	2	E	35	SW	SE	100		16.3	Irrigation	POA #1 POA #3	1985	
1	N	2	E	35	SE	SE	100	14.6	Irrigation	POA #1, POA #2	1985	POA	1	N	2	E	35	SE	SE	100		14.6	Irrigation	POA #1 POA #3	1985	
1	N	2	E	36	NE	NW	100	7.4	Irrigation	POA #1, POA #2	1985	POA	1	N	2	E	36	NE	NW	100		7.4	Irrigation	POA #1 POA #3	1985	
1	N	2	E	36	NW	NW	100, 200	16.8	Irrigation	POA #1, POA #2	1985	POA	1	N	2	E	36	NW	NW	100, 200		16.8	Irrigation	POA #1 POA #3	1985	
1	N	2	E	36	SW	NW	100, 200	13.8	Irrigation	POA #1, POA #2	1985	POA	1	N	2	E	36	SW	NW	100, 200		13.8	Irrigation	POA #1 POA #3	1985	
1	N	2	E	36	SE	NW	100	5.0	Irrigation	POA #1, POA #2	1985	POA	1	N	2	E	36	SE	NW	100		5.0	Irrigation	POA #1 POA #3	1985	
TOTAL ACRES:												TOTAL ACRES:														

Additional remarks: POA #3 will replace abandoned POA #2. Each POA will be used on all acreage that is irrigated.

RECEIVED

SEP 16 2021

OWRD

For Place of Use or Character of Use Changes

OWRD

Are there other water right certificates, water use permits or ground water registrations associated with the "from" or the "to" lands? Yes No

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

Pursuant to ORS 540.510, any "layered" water use such as an irrigation right that is supplemental to a primary right proposed for transfer must be included in the transfer or be cancelled. Any change to a ground water registration must be filed separately in a ground water registration modification application.

For Substitution (ground water supplemental irrigation will be substituted for surface water primary irrigation)

Ground water supplemental Permit or Certificate # NA;

Surface water primary Certificate # NA.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

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
POA #1	Yes	1234	500	5"	Unknown	0-65'	442-487	226	Sand & gravel	500 gpm
POA #2	Yes	114188	358	8"	Unknown	Unknown	Unknown	180	Gravel	500 gpm
POA #3	No		NA	NA	NA	NA	NA	NA	NA	NA

Application for Water Right Transfer

Evidence of Use Affidavit



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

Please print legibly or type. Be as specific as possible. Attach additional pages if you need more spacing. Supporting documentation must be attached.

State of Oregon)
) ss
 County of MULTNOMAH)

RECEIVED
 SEP 16 2021
 OWRD

I, GARY SHEPHERD, in my capacity as ATTORNEY FOR METRO,
 mailing address 600 NE GRAND AVE., PORTLAND, OR 97232.
 telephone number (503)797-1600, being first duly sworn depose and say:

1. My knowledge of the exercise or status of the water right is based on (check one):

- Personal observation Professional expertise

2. I attest that:

Water was used during the previous five years on the **entire** place of use for Certificate # 91809; **OR**

My knowledge is specific to the use of water at the following locations within the last five years:

Certificate #	Township	Range	Mer	Sec	¼ ¼	Gov't Lot or DLC	Acres (if applicable)

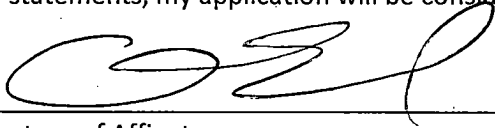
OR

- Confirming Certificate # _____ has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____ (For Historic POD/POA Transfers)

(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): IRRIGATION

4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.



 Signature of Affiant

9/9/21 **RECEIVED**
 _____ Date **SEP 16 2021**

Signed and sworn to (or affirmed) before me this 9th day of Sept. **OWRD** 2021.





 Notary Public for Oregon

My Commission Expires: 8/02/2025 ⁽²¹¹⁷⁾

Supporting Documents	Examples
<input type="checkbox"/> Copy of a water right certificate that has been issued within the last five years. (not a remaining right certificate)	Copy of confirming water right certificate that shows issue date
<input type="checkbox"/> Copies of receipts from sales of irrigated crops or for expenditures related to use of water	<ul style="list-style-type: none"> ● Power usage records for pumps associated with irrigation use ● Fertilizer or seed bills related to irrigated crops ● Farmers Co-op sales receipt
<input type="checkbox"/> Records such as FSA crop reports, irrigation district records, NRCS farm management plan, or records of other water suppliers	<ul style="list-style-type: none"> ● District assessment records for water delivered ● Crop reports submitted under a federal loan agreement ● Beneficial use reports from district ● IRS Farm Usage Deduction Report ● Agricultural Stabilization Plan ● CREP Report
<input checked="" type="checkbox"/> Aerial photos containing sufficient detail to establish location and date of photograph	<p>Multiple photos can be submitted to resolve different areas of a water right. If the photograph does not print with a "date stamp" or without the source being identified, the date of the photograph and source should be added.</p> <p>Sources for aerial photos: OSU – www.oregonexplorer.info/imagery OWRD – www.wrd.state.or.us Google Earth – earth.google.com TerraServer – www.terra-server.com</p>
<input type="checkbox"/> Approved Lease establishing beneficial use within the last 5 years	Copy of instream lease or lease number

WATER WELL REPORT
STATE OF OREGON

MULT
1234

RECEIVED

APR 24 1984

State Well No. 1W/2E-35aC

WATER RESOURCES DEPT.
SALEM, OREGON

State Permit No. _____

(1) OWNER:

Name MULTNOMAH COUNTY ORE.
Address 2505 SE 11TH AVE
City PORTLAND State ORE. 97202

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon

If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Air Driven Domestic Industrial Municipal
Mud Dug Irrigation Test Well Other
 Bored Thermal: Withdrawal Reinjection

(4) PROPOSED USE (check):

(5) CASING INSTALLED:

Steel Plastic
Threaded Welded
0" Diam. from 12 ft. to 442 ft. Gauge 365
6" Diam. from 400 ft. to 420 ft. Gauge 239
42 " Diam. from 42 ft. to 487 ft. Gauge 259
INNER INSTALLED:
" Diam. from 487 ft. to 500 ft. Gauge 259

PERFORATIONS:

Perforated? Yes No

Type of perforator used _____

Size of perforations in. by in.
..... perforations from ft. to ft.
..... perforations from ft. to ft.
..... perforations from ft. to ft.

(7) SCREENS:

Well screen installed? Yes No

Manufacturer's Name UOP JOHNSON
Type STAINLESS STEEL Model No. _____
Diam. 5 Slot Size 50 Set from 442 ft. to 487 ft.
Diam. _____ Slot Size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level

..... pump test made? Yes No If yes, by whom? STRASSER
500 gal/min. with 133 ft. drawdown after 4 hrs.
..... test gal/min. with drill stem at ft. hrs.
Bailer test gal/min. with ft. drawdown after hrs.
Artesian flow g.p.m.
Temperature of water 53° Depth artesian flow encountered ft.

(9) CONSTRUCTION:

Special standards: Yes No

Well seal—Material used CEMENT GROUT
Well sealed from land surface to 65 ft.
Diameter of well bore to bottom of seal 16 in.
Diameter of well bore below seal 10 in.
Number of sacks of cement used in well seal 72 sacks
How was cement grout placed? GROUT WAS PUMPED THROUGH DNE INCH PIPE FROM BOTTOM UP AS CASING WAS REMOVED
Was pump installed? Type HP Depth ft.
Was a drive shoe used? Yes No Plugs Size: location ft.
Did any strata contain unusable water? Yes No
Type of Water? depth of strata
Method of sealing strata off
Was well gravel packed? Yes No Size of gravel: NO. 6 SAND
Gravel placed from 397 ft. to 500 ft.

(10) LOCATION OF WELL:

County MULTNOMAH Driller's well number 5600
SW 1/4 NE 1/4 Section 35 T. 1N R. 2E W.M.
Tax Lot # _____ Lot _____ Blk _____ Subdivision _____

Address at well location: _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 352 ft.
Static level 226 ft. below land surface. Date 3/23/84
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____

Depth drilled 500 ft. Depth of completed well 500 ft.
Formation: Describe color, texture, grain size and structure of materials; and show thickness and nature of each stratum and aquifer penetrated, with at least one entry for each change of formation. Report each change in position of Static Water Level and indicate principal water-bearing strata.

MATERIAL	From	To	SWL
BROWN CLAY	0	4	
GRAVEL AND CLAY	4	22	
LOOSE GRAVEL	22	26	
CLAY AND GRAVEL	26	136	
SAND GRAVEL AND CLAY	136	163	
BROWN AND GREY CLAY	163	175	
GREY SILTSTONE	175	198	
BLUE GREY GREEN CLAY	198	233	
SAND GRAVEL AND CLAY	233	258	
GREY CLAY SOME GRAVEL	258	276	
CEMENTED GRAVEL	276	352	
SAND GRAVEL AND SILT	352	400	
CLAY AND GRAVEL	400	420	
SAND GRAVEL AND SILT	420	487	
GREEN CLAY	487	490	
GREY SHALE	490	500	

RECEIVED
SEP 16 2021

Work started JAN 3 19 84 Completed MAR 21 19 84
Date well drilling machine moved off of well MAR 30 19 84

Drilling Machine Operator's Certification:

This well was constructed under my direct supervision. Materials used and information reported above are true to my best knowledge and belief.
[Signed] Heran Johnson Date 4/23 19 84
(Drilling Machine Operator)
Drilling Machine Operator's License No. 911

Water Well Contractor's Certification:

This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.
Name R.J. Strasser Drilling Co. (Type or print)
(Person, firm or corporation)
Address 8110 S.E. Sunset Lane, Portland OR. 97206
[Signed] Robert J. Strasser
(Water Well Contractor)
Contractor's License No. 10 Date APR 23 19 84

NOTICE TO WATER WELL CONTRACTOR
The original and first copy of this report are to be filed with the

WATER RESOURCES DEPARTMENT,
SALEM, OREGON 97310
within 30 days from the date of well completion.

SP*12658-690

WELL ID. # L _____

OWRD

Glendoveer Golf Course Well 2 (East)

(1) LAND OWNER Well Number _____
 Name Metra
 Address 600 NE Grand Ave.
 City Portland State OR Zip 97232

(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 345 ft.
 Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			
Diameter	From	To	Material	From	To	Sacks or pounds

How was seal placed: Method A B C D E
 Other _____

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:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used Inside Outside None
 Final location of shoe(s) _____

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material _____

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>
						<input type="checkbox"/>	<input type="checkbox"/>

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

Pump Bailor Air Flowing Artesian
 Yield gal/min Drawdown Drill stem at Time
1 hr.

Temperature of water _____ 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 Multnomah Latitude _____ Longitude _____
 Township 1 N N or S Range 2 E E or W. WM.
 Section 36 SE 1/4 NW 1/4
 Tax Lot 100 Lot _____ Block _____ Subdivision _____
 Street Address of Well (or nearest address) _____

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

(11) WATER BEARING ZONES:

Depth at which water was first found _____

From	To	Estimated Flow Rate	SWL

(12) WELL LOG:
 Ground Elevation _____

Material	From	To	SWL
Details about this well are uncertain. T-11517 states that this is the well listed on GR-2925 which describes a well with 6" casing to a total depth of 260 feet. However, information in file T-11517 indicates that the well is 345 feet deep and may have 12" casing based on records from a 1997 pump service. This suggests that the original GR-2925 well (MUNT 1241) was reconstructed or replaced by the well described on this report.			
This well is probably the well described in USGS OFR 90-126 as IN/2E-36B-D1, 358 feet deep w/8" casing. USGS mess. SWL as 180.4 feet hsd on 3/28/1989.			
Depth indicates Troutdale Gravel aquifer			
Date started	Completed		?

SOURCE OF DATA/INFO Water right file T-11517. This is the APOA described as 165 feet N, 84 feet E from the SE 1/16 corner of S. 36.

COMPILED BY: Karl L. Wozniak
Groundwater Section

DATE: November 17, 2013