

# Application for Permit Amendment

## Part 1 of 5 – Minimum Requirements Checklist



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

**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](http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator).
- 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-16927**  
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  Map not included or incomplete

Land Use Form not enclosed or incomplete

Additional signature(s) required  Part \_\_\_\_\_ is incomplete

Other/Explanation \_\_\_\_\_

Staff: \_\_\_\_\_ 503- \_\_\_\_\_ 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 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Mid Valley Farms, Inc. c/o Ryan Glaser		PHONE NO. 541-928-8036	ADDITIONAL CONTACT NO. 541-936-0530
ADDRESS 31915 Seven Mile Lane			FAX NO.
CITY Tangent	STATE OR	ZIP 97389	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.			

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

AGENT/BUSINESS NAME Schroeder Law Offices, Attn: Sarah Liljefelt		PHONE NO. 503-281-4100	ADDITIONAL CONTACT NO.
ADDRESS 1915 NE Cesar E Chavez Blvd			FAX NO.
CITY Portland	STATE OR	ZIP 97212	E-MAIL counsel@water-law.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 permit amendment; and why:  
 Move Well #2 to a better place for development of the groundwater resource.

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.

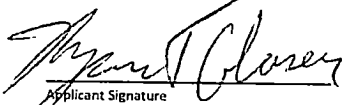
If NO, what are the completion dates of the permit(s)? 10/1/2022

- 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: Albany Democrat-Herald or Corvallis Gazette-Times

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

  
 Applicant Signature

**Ryan Glaser**  
 Print Name (and Title if applicable)

10-11-21  
 Date

**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.

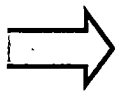
**Check the appropriate box, if applicable:**

- 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 <b>Linn County</b>	ADDRESS <b>300 Fourth Ave SW</b>	
CITY <b>Albany</b>	STATE <b>OR</b>	ZIP <b>97321</b>

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

ENTITY NAME	ADDRESS	
CITY	STATE	ZIP

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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.

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**PERMIT # G-16927**

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**Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)**  
(Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

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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	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LINN 61229	12 S	3 W	21	NE NE	100	1320 feet south and 400 feet west from NE corner Section 21
Well 1	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 61229	12 S	3 W	21	NE NE	100	1269 feet south 558 feet west from NE corner Section 21
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NOT YET DRILLED	12 S	3 W	21	SE NE	100	1656 feet south and 300 feet west from NE corner Section 21
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NOT YET DRILLED	12 S	3 W	21	NE NE	100	1269 feet south and 948 feet west from NE corner Section 21
Well 3	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NOT YET DRILLED	12 S	3 W	21	SE NE	100	1980 feet south and 100 feet west from NE corner Section 21
Well 4	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LINN 59840	12 S	3 W	20	NW NE	100	100 feet south and 450 feet west from SE corner Lovell Knighton DLC 54
Well 5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NOT YET DRILLED	12 S	3 W	20	NW NE	100	100 feet south and 800 feet west from SE corner Lovell Knighton DLC 54
Well 6	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	NOT YET DRILLED	12 S	3 W	20	NE NE	100	100 feet south and 250 feet east from SE corner Lovell Knighton DLC 54
Well 7	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	LINN 61230	12 S	3 W	21	NE NE	100	1320 feet south and 200 feet west from NE corner Section 21
Well 7	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	LINN 61230	12 S	3 W	21	NE NE	100	1269 feet south and 252 feet west from NE corner Section 21

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

- |                                                   |                                                                       |
|---------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> Place of Use (POU)       | <input checked="" type="checkbox"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input type="checkbox"/> 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.

**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.

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Please use and attach additional pages of Table 2 as needed.  
See page 6 for instructions.

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

**Table 2. Description of Changes to Water Use Permit # G-16927**

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 (if applicable)	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 (if applicable)	POD(s) or POA(s) to be used (from Table 1)	Priority Date				
<b>EXAMPLE</b>																								
2	S	9	E	15	NE	NW	100		15.0	POD #1 POD #2		POU/POD	2	S	9	E	15	NW	NW	100	1	10.0	POD #5	
"	"	"	"	"	"	"	"	"	EXAMPLE	"		"	2	S	9	E	15	SW	NW	200		5.0	POD #6	
													12	S	3	W	15	NE	SW	200		40	Wells 1-7	9/14/11
													12	S	3	W	15	NW	SW	200		40	Wells 1-7	9/14/11
													12	S	3	W	15	SW	SW	200		40	Wells 1-7	9/14/11
													12	S	3	W	15	SE	SW	200		40	Wells 1-7	9/14/11
													12	S	3	W	15	NW	SE	200		40	Wells 1-7	9/14/11
													12	S	3	W	15	SW	SE	200		39	Wells 1-7	9/14/11
													12	S	3	W	16	SW	SW	600		14	Wells 1-7	9/14/11
													12	S	3	W	16	SE	SW	600		10	Wells 1-7	9/14/11
													12	S	3	W	17	SE	SE	600		10	Wells 1-7	9/14/11
													12	S	3	W	20	NE	NE	100		29	Wells 1-7	9/14/11

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											12	S	3	W	20	NE	NE	600		4	Wells 1-7	9/14/11
											12	S	3	W	20	NE	NE	102		2	Wells 1-7	9/14/11
											12	S	3	W	20	NW	NE	100		40	Wells 1-7	9/14/11
											12	S	3	W	20	SW	NE	102		40	Wells 1-7	9/14/11
											12	S	3	W	20	SE	NE	102		40	Wells 1-7	9/14/11
											12	S	3	W	21	NE	NE	100		40	Wells 1-7	9/14/11
											12	S	3	W	21	NW	NE	100		40	Wells 1-7	9/14/11
											12	S	3	W	21	SW	NE	100		40	Wells 1-7	9/14/11
											12	S	3	W	21	SE	NE	100		40	Wells 1-7	9/14/11
											12	S	3	W	21	NE	NW	600		18	Wells 1-7	9/14/11
											12	S	3	W	21	NE	NW	201		14	Wells 1-7	9/14/11
											12	S	3	W	21	NW	NW	600		23	Wells 1-7	9/14/11
											12	S	3	W	21	NW	NW	102		17	Wells 1-7	9/14/11
											12	S	3	W	21	SW	NW	102		40	Wells 1-7	9/14/11
											12	S	3	W	21	SE	NW	201		36	Wells 1-7	9/14/11
											12	S	3	W	22	NE	NW	202		40	Wells 1-7	9/14/11
											12	S	3	W	22	NW	NW	202		40	Wells 1-7	9/14/11
											12	S	3	W	22	SW	NW	202		12.5	Wells 1-7	9/14/11
											12	S	3	W	22	SW	NW	200		16	Wells 1-7	9/14/11
											12	S	3	W	22	SE	NW	202		12.5	Wells 1-7	9/14/11
											12	S	3	W	22	SE	NW	200		27.5	Wells 1-7	9/14/11

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TACS



TOTAL ACRES	
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TOTAL ACRES	884.5
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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](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 2	No			8"	TBD	TBD	TBD		Unknown gravel/sand	
Well 3	No			8"	TBD	TBD	TBD		Unknown gravel/sand	
Well 5	No			8"	TBD	TBD	TBD		Unknown gravel/sand	
Well 6	No			8"	TBD	TBD	TBD		Unknown gravel/sand	

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

MAR 09 2015

WELL I.D. # L 112553

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SALEM, OR

START CARD # 210040

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

(1) LAND OWNER Well Number West  
Name Mid Valley Farms  
Address 31915 Seven Mile Lane  
City Tangent State OR Zip 97389

(2) TYPE OF WORK  New Well  
 Deepening  Alteration (repair/recondition)  Abandonment  Conversion

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Other

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

(5) BORE HOLE CONSTRUCTION Special Construction:  Yes  No  
Depth of Completed Well 180.5 ft.  
Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds	
16"	0	20	bentonite	0	20	18 sacks	
12"	20	201	silica sand	180	201	23 sacks	

How was seal placed: Method  A  B  C  D  E  
 Other as per OAR 690-210-340  
Backfill placed from 180 ft. to 201 ft. Material silica sand  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

Casing/	Diameter	From	To	Gauge	Steel				Plastic				
					Welded	Threaded	Welded	Threaded	Welded	Threaded			
Casing:	12"	+2	82'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	10"	109	129	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	10"	144	164	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	10"	175	180	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" 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) 201

(7) PERFORATIONS/SCREENS  
 Perforations Method \_\_\_\_\_  
 Screens Type V wire Material SS

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
80	100	.035		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
100	110	.035		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
130	135	.016		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
140	145	.012		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
165	175	.016		12	tele	<input checked="" 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
350	99.5		

Temperature of water 50 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 (legal description)  
County Linn **OWRD**  
Tax Lot NONE Lot \_\_\_\_\_  
Township 12 S Range 3 W WM  
Section 21 NE 1/4 NE 1/4

Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) 31915 Seven Mile Lane  
Tangent, OR 97389

(10) STATIC WATER LEVEL  
10 ft. below land surface. Date 12-1-13  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES  
Depth at which water was first found 85

From	To	Estimated Flow Rate	SWL
85	106	200	10
130	134	50	10
138	134	50	10
169	172	50	10

(12) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To	SWL
topsoil	0	1	
clay, brown	1	15	10
clay, w/gravels	15	23	10
gravels, sandy	23	63	10
clay, tan	63	70	10
clay, blue/gray w/gravels	70	75	10
clay, gray w/sand	75	80	10
sand, w/small gravels	80	95	10
sand/gravels	95	105	10
gravels, w/fine sand	105	106	10
clay, blue/gray w/gravels	106	130	10
sand, greenish gray	130	134	10
sand, w/small gravels	134	135	10
clay, brown, gray	135	138	10
sand, dark blue gray	138	142	10
sand, coarse, blackish blue gray	142	144	10

Date Started 9-13-13 Completed 12-18-13

(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.  
WWC Number \_\_\_\_\_ Date \_\_\_\_\_

(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.  
WWC Number 97 Date \_\_\_\_\_  
Signed Mark W. Christensen

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

WELL I.D. # L 112553

START CARD # 210040

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

(1) LAND OWNER Well Number West  
 Name Mid Valley Farms  
 Address 31915 Seven Mile Lane  
 City Tangent State OR Zip 97389

(2) TYPE OF WORK  New Well  
 Deepening  Alteration (repair/recondition)  Abandonment  Conversion

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Other

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

(5) BORE HOLE CONSTRUCTION Special Construction:  Yes  No  
 Depth of Completed Well 180.5 ft.  
 Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
16"	0	20	bentonite	0	20	18 sacks
12"	20	201	silica sand	180	201	23 sacks

How was seal placed: Method  A  B  C  D  E  
 Other as per OAR 690-210-340  
 Backfill placed from 180 ft. to 201 ft. Material SILICA SAND  
 Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	+2	82'	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
liner 10"	109	129	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 10"	144	164	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10"	175	180	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
 Final location of shoe(s) 201

(7) PERFORATIONS/SCREENS  
 Perforations Method \_\_\_\_\_  
 Screens Type V wire Material SS

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
80	100	.035		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
100	110	.035		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
130	135	.016		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
140	145	.012		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
165	175	.016		12	tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time
350	99.5		

Temperature of water 50 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  Other \_\_\_\_\_  
 Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL (legal description)  
 County Linn  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_  
 Township 12 S Range 3 W WM  
 Section 21 NE 1/4 NE 1/4

Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
 Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) 31915 Seven Mile Lane  
Tangent, OR 97389

(10) STATIC WATER LEVEL  
10 ft. below land surface. Date 12-1-13  
 \_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
 Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES  
 Depth at which water was first found 85

From	To	Estimated Flow Rate	SWL
85	106	200	10
130	134	50	10
138	134	50	10
169	172	50	10

(12) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To	SWL
2nd page of material listing			
clay, gray, dense	144	169	10
sand w/small gravels	169	172	10
clay, gray	172	201	10

RECEIVED  
 OCT 13 2021  
 OWRD

Date Started 9-13-13 Completed 12-18-13

(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.

WWC 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.

WWC Number 97 Date \_\_\_\_\_

Signed Mark W. Christensen

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

MAR 09 2015

WELL I.D. # L 112554

START CARD # 210041

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

(1) LAND OWNER Well Number East well  
Name Mid Valley Farms  
Address 31915 Seven Mile Lane  
City Tangent State OR Zip 97389

(2) TYPE OF WORK  New Well  
 Deepening  Alteration (repair/recondition)  Abandonment  Conversion

(3) DRILL METHOD  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Other

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

(5) BORE HOLE CONSTRUCTION Special Construction:  Yes  No  
Depth of Completed Well 178.5 ft.  
Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE				SEAL			
Diameter	From	To	Material	From	To	Sacks or Pounds	
16"	0	20	bentonite	0	20	27 sacks	
12"	20	181					

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

Backfill placed from 178 ft. to 171 ft. Material sand 8/12  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 12"	+2	91	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner: 10"	111.5	121.5	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
10"	173	178.5		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Drive Shoe used  Inside  Outside  None  
Final location of shoe(s) 181

(7) PERFORATIONS/SCREENS  
 Perforations Method \_\_\_\_\_  
 Screens Type "V" wire Material SS

From	To	Slot Size	Number	Diameter	Tele/pipe size	Casing	Liner
86.5	106	.030	1	12"	Tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
106	111.5	.020	1	12"	Tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
121.5	137	.035	1	12"	Tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
137	157.5	.016	1	12"	Tele	<input checked="" type="checkbox"/>	<input type="checkbox"/>
157.5	173	.030	1	12"	Tele	<input checked="" 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
300	100	180	
well output	may fluctuate		

Temperature of water 50 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 (legal description)  
County Linn  
Tax Lot NONE Lot \_\_\_\_\_  
Township 12 S Range 3 W WM  
Section 21 NE 1/4 NE 1/4

Lat \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
Long \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) 31915 Seven Mile Lane  
Tangent, OR 97389

(10) STATIC WATER LEVEL  
12 ft. below land surface. Date 12-2-13  
\_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
Artesian pressure \_\_\_\_\_ lb. per square inch Date \_\_\_\_\_

(11) WATER BEARING ZONES  
Depth at which water was first found 90

From	To	Estimated Flow Rate	SWL
90	115	75 gpm	12
125	144	100 gpm	12
149	152	50 gpm	12
160	165	50 gpm	12
168	171	25 gpm	12

(12) WELL LOG Ground Elevation \_\_\_\_\_

Material	From	To	SWL
top soil	0	2	
clay, tan	2	10	
clay w/gravels	10	20	12
sandy silt, gravels	20	50	12
clay, gray, tan	50	55	12
sand, gravels	55	60	12
clay, gray tan	60	80	12
sand, gravels blue gray	80	105	12
clay, gray, sandy	105	110	12
sand, blue gray w/gravels	110	114	12
clay, blue gray	114	125	12
clay, sand	125	142	12
gravels, small cemented, sand	142	144	12
clay, gray	144	149	12
sand w/cemented small gravels	149	157	12
continued on 2nd sheet			

Date Started 9-9-13 Completed 12-16-13

(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.

WWC Number 1886 Date OCT 13 2021

Signed \_\_\_\_\_ OWRD

(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.

WWC Number 97 Date \_\_\_\_\_

Signed \_\_\_\_\_

# LINN 61230

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

WELL I.D. # L 112554

START CARD # 210041

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

**(1) LAND OWNER** Well Number East well  
 Name Mid Valley Farms  
 Address 31915 Seven Mile Lane  
 City Tangent State OR Zip 97389

**(2) TYPE OF WORK**  New Well  
 Deepening  Alteration (repair/recondition)  Abandonment  Conversion

**(3) DRILL METHOD**  
 Rotary Air  Rotary Mud  Cable  Auger  Cable Mud  
 Other \_\_\_\_\_

**(4) PROPOSED USE**  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

**(5) BORE HOLE CONSTRUCTION** Special Construction:  Yes  No  
 Depth of Completed Well 178.5 ft.  
 Explosives used:  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

BORE HOLE			SEAL			Sacks or Pounds
Diameter	From	To	Material	From	To	
16"						

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**

Casing:	Diameter	From	To	Gauge	Steel			
					Plastic	Welded	Threaded	
					<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"/>
					<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  Bailer  Air  Flowing Artesian

Yield gal/min	Drawdown	Drill stem at	Time

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 (legal description)**  
 County Linn  
 Tax Lot \_\_\_\_\_ Lot \_\_\_\_\_  
 Township 12 S Range 3 W WM  
 Section 21 NE 1/4 NE 1/4

Lat \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)  
 Long \_\_\_\_\_ ° \_\_\_\_\_ ' \_\_\_\_\_ " or \_\_\_\_\_ (degrees or decimal)

Street Address of Well (or nearest address) 31915 Seven Mile Lane  
Tangent, OR 97389

**(10) STATIC WATER LEVEL**  
 \_\_\_\_\_ ft. below land surface. Date \_\_\_\_\_  
 \_\_\_\_\_ 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
<b>2nd sheet of materials</b>			
sand, coarse w/small gravels	157	160	12
sand, coarse w/clay	160	165	12
clay, gray	165	168	12
sand, blackish blue gray	168	171	12
clay, gray, tight	171	180	12

RECEIVED BY OWRD      RECEIVED  
 FEB 17 2015      OCT 13 2021  
 SALEM, OR      OWRD

Date Started \_\_\_\_\_ Completed \_\_\_\_\_

**(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.

WWC 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.

WWC Number 97 Date \_\_\_\_\_

Signed Mark W. [Signature]

13843

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

10-28-2011

WELL LABEL # L 107703

START CARD # 1015121

(1) LAND OWNER Owner Well I.D. 3351  
First Name RYAN Last Name GLASER  
Company MID VALLEY FARMS  
Address 31915 SEVEN MILE LANE  
City TANGENT State OR Zip 97389

(2) TYPE OF WORK  New Well  Deepening  Conversion  
 Alteration (repair/recondition)  Abandonment

(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 159.00 ft.

BORE HOLE SEAL sacks/lbs  
Dia From To Material From To Amt lbs

12	0	25	Bentonite Chips	0	25	25	S
8	25	159					

How was seal placed: Method  A  B  C  D  E

Other POURED DRY/PROBED  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Filter pack from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_ Size \_\_\_\_\_  
Explosives used:  Yes Type \_\_\_\_\_ Amount \_\_\_\_\_

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
<input checked="" type="checkbox"/>	<input type="checkbox"/>	8	<input checked="" type="checkbox"/>	1.5	159	.250	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Shoe  Inside  Outside  Other Location of shoe(s) 159  
Temp casing  Yes Dia 12 From 0 To 19

(7) PERFORATIONS/SCREENS  
Perforations Method HOLTE AIR PERFORATOR  
Screens Type \_\_\_\_\_ Material \_\_\_\_\_

Perf/S Casing/Screen green Liner Dia From To Scrn/slot width Slot length # of slots Tele/ pipe size

Perf	Casing	8	104	135	333	1	840	
------	--------	---	-----	-----	-----	---	-----	--

(8) WELL TESTS: Minimum testing time is 1 hour  
 Pump  Bailor  Air  Flowing Artesian  
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)

400			155	2
-----	--	--	-----	---

Temperature 56 °F Lab analysis  Yes By \_\_\_\_\_  
Water quality concerns?  Yes (describe below)  
From To Description Amount Units

--	--	--	--	--

(9) LOCATION OF WELL (legal description)  
County Linn Twp 12.00 S N/S Range 3.00 W E/W WM  
Sec 20 NW 1/4 of the SE 1/4 Tax Lot 100  
Tax Map Number \_\_\_\_\_ Lot \_\_\_\_\_  
Lat \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
Long \_\_\_\_\_ " or \_\_\_\_\_ DMS or DD  
 Street address of well  Nearest address  
EAST OF WIRTH DR CO.RD 789 TANGENT LOOP RD.

(10) STATIC WATER LEVEL  
Date SWL(psi) + SWL(ft)  
Existing Well / Predeepening \_\_\_\_\_  
Completed Well 10-18-2011 \_\_\_\_\_ 11.5  
Flowing Artesian?  Dry Hole?

WATER BEARING ZONES Depth water was first found

SWL Date	From	To	Est Flow	SWL(psi)	+ SWL(ft)
10-18-2011	43	134	400		11.5

(11) WELL LOG Ground Elevation

Material	From	To
TOP SOIL	0	1
CLAY-BROWN	1	16
SAND & GRAVEL W/BROWN CLAY	16	30
SAND & GRAVEL W/DARK BROWN CLAY	30	43
SAND & GRAVEL-GRAY	43	61
BLACK SAND & GRAVEL	61	80
BLACK SAND	80	93
SAND & GRAVEL-GRAY	93	102
SAND & GRAVEL-BLACK	102	134
CLAY-DARK GRAY	134	157
2 FT PLUG REMAINS IN CASING	157	159

Date Started 10-12-2011 Completed 10-18-2011

(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 \_\_\_\_\_  
Electronically Filed  
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 1581 Date 10-28-2011  
Electronically Filed  
Signed LARRY A GRAY (E-filed) 13843  
Contact Info (optional) www.graywelldrilling.com