

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)

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- 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.
- 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-18537
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):

<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"/> Part _____ is incomplete
<input type="checkbox"/> Additional signature(s) required	

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°).

Part 4 of 5 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME Stauffer Farms Inc. c/o Jeff Bizon <i>Sheryl Stauffer</i>		PHONE NO. (503) 476-4712	ADDITIONAL CONTACT NO.
ADDRESS 13851 Stauffer Rd NE		FAX NO.	
CITY Hubbard	STATE OR	ZIP 97032	E-MAIL
<p align="center">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>			

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

AGENT/BUSINESS NAME DOANN HAMILTON / PACIFIC HYDRO-GEOLOGY, INC.		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 632-5983 (cell)
ADDRESS 18487 S. Valley Vista Road		FAX NO. (503) 632-5983	
CITY Mulino	STATE OR	ZIP 97042	E-MAIL phgdmh@gmail.com
<p align="center">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 permit amendment; and why:
Our system is set up where all our wells are run through a system of common mainlines and filter treatment stations. To assure the entire system is approved for this water right, we are adding the additional wells within our system.

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)? January 29, 2026

- 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: Woodburn Independent

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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	\$1,360
2	Types of change proposed: <input type="checkbox"/> Place of Use <input checked="" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>1 (2a)</u> Subtract 1 from the number in line 2a = <u>0 (2b) If only one change, this will be 0</u> Multiply line 2b by \$1090 and enter »	2	\$0
3	Number of permits included in Permit Amendment <u>1 (3a)</u> Subtract 1 from the number in 3a: <u>0 (3b) If only one permit this will be 0</u> Multiply line 3b by \$610 and enter »	3	\$0
4	Do you propose to add or change a well, or change from a surface water POD to a well? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: enter \$480 for the 1 st well to be added or changed <u>\$480 (4a)</u> Do you propose to add or change additional wells? <input type="checkbox"/> No: enter 0 <input checked="" type="checkbox"/> Yes: multiply the number of additional wells by \$410 <u>\$1,640 (4b)</u> Add line 4a to line 4b and enter »	4	\$2,120
5	Do you propose to change the place of use? <input checked="" type="checkbox"/> No: enter 0 on line 5 <input type="checkbox"/> Yes: enter the cfs for the portions of the permits to be amended (see below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (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	\$3,480
7	Is this permit amendment: <input type="checkbox"/> necessary to complete a project funded by the Oregon Watershed Enhancement Board (OWEB) under ORS 541.932? <input type="checkbox"/> 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	\$0
8	Subtract line 7 from line 6 » Permit Amendment Fee:	8	\$3,480

***Example for Line 5a calculation to transfer 45.0 acres of Primary Permit S-12345 (total 1.25 cfs for 100 acres) and 45.0 acres of Supplemental Permit S-87654 (1/80 cfs per acre) on the same land:**

1. For irrigation calculate cfs for each permit involved as follows:
 - a. Divide total authorized cfs by total acres in the permit (*for S-12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be changed to get the application cfs (*x 45 ac = 0.56 cfs*).
 - b. If the water right permit does not list total cfs, but identifies the allowable use as 1/40 or 1/80 of a cfs per acre; multiply number of acres proposed for change by either 0.025 (1/40) or 0.0125 (1/80). (*For S-87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
2. Add cfs for the portions of permits on all the land included in the application; however **do not count cfs for supplemental permits on acreage for which you have already calculated the cfs fee for the primary permit on the same land**. The fee should be assessed only once for each “on the ground” acre included in the application. (*In this example, blank 5a would be only 0.56 cfs, since both permits serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0*).



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

Sheryl A. Stauffer
Applicant Signature

SHERYL A. STAUFFER, Sec/Coowner 09/20/2021
Print Name (and Title if applicable) Date

Applicant Signature

Print Name (and Title if applicable)

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 NA	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 NA	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 Marion County Planning Division	ADDRESS 5155 Silverton Road NE	
CITY Salem	STATE Oregon	ZIP 97305

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-18537

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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 type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 765	4	S	1	W	26	SW	NW	DLC 63	25 feet south and 1,960 feet east from the NW corner, DLC 63.
Well 2	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 63689	4	S	1	W	26	SW	NW	DLC 63	40 feet south and 1,860 feet east from the NW corner, DLC 63.
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 767	4	S	1	W	26	NW	SW	DLC 63	1,470 feet south and 860 feet east from the NW corner, DLC 63.
Well 4	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 764	4	S	1	W	26	SW	SW	DLC 63	220 feet north and 70 feet east from the SW corner, Section 26.
Well 5	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 69905	4	S	1	W	35	NW	NW	DLC 63	1,030 feet south and 555 feet east from the NW corner, Section 35.
Well 6	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 1013	4	S	1	W	26	SE	SW	DLC 63	30 feet north and 1,360 feet west from the NW corner, DLC 53.

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"/> Point of Appropriation/Well (POA) |
| <input type="checkbox"/> Point of Diversion (POD) | <input checked="" type="checkbox"/> Additional Point of Appropriation (APOA) |
| <input type="checkbox"/> Additional Point of Diversion (APOD) | <input type="checkbox"/> 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: NA

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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Table 2. Description of Changes to Water Use Permit # G-18537

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			
									APOA	4	S	1	W	26	SW	NE	1200	DLC 63	0.2	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	26	SW	NW	1200	DLC 63	6.4	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	26	SE	NW	1200	DLC 63	7.7	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	26	NE	SW	1200	DLC 63	19.8	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	26	NW	SW	1200	DLC 63	10.0	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	26	SW	SW	1200	DLC 63	7.7	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	26	SE	SW	1200	DLC 63	11.7	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	26	NW	SE	1200	DLC 63	10.3	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	26	SW	SE	1200	DLC 63	2.9	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	27	NW	SE	1700	DLC 54	4.6	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	27	SW	SE	1700	DLC 54	9.4	Wells 1,2,3,4,5,6	3-4-2020
									APOA	4	S	1	W	27	SE	SE	1200	DLC 63	1.2	Wells 1,2,3,4,5,6	3-4-2020

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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 Interval s (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	MARI 765	See Well Log MARI 765							
Well 2	YES	MARI 63689	See Well Log MARI 63689							
Well 3	YES	MARI 767	See Well Log MARI 767							
Well 4	YES	MARI 764	See Well Log MARI 764							
Well 5	YES	MARI 69905	See Well Log MARI 69905							
Well 6	YES	MARI 1013	See Well Log MARI 1013							

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Not less than full rate

										APOA	4	S	1	W	35	NE	NW	200	DLC 63	3.5	Wells 1,2,3,4,5,6	3-4-2020
										APOA	4	S	1	W	35	NW	NW	200, 600	DLC 63	5.3	Wells 1,2,3,4,5,6	3-4-2020
										APOA	4	S	1	W	35	SW	NW	200	DLC 63	12.1	Wells 1,2,3,4,5,6	3-4-2020
										APOA	4	S	1	W	35	SE	NW	200	DLC 63	11.7	Wells 1,2,3,4,5,6	3-4-2020
TOTAL ACRES											TOTAL ACRES										124.5	

Additional remarks: None.

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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.

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WATER WELL REPORT

STATE OF OREGON
(Please type or print)
WATER RESOURCES DEPT.
SALEM, OREGON

State Well No. 431/w-26
State Permit No. G-8085
Appl. G-8774

MAR 20 1978

765
 MARI...
 MAR 1978

(1) OWNER:

Name Stauffer Bros.
Address Hubbard, Oregon 97032

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Cable Dug
Driven Jetted Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal
Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
18" Diam. from 0 ft. to 20 ft. Gage 1/4"
12" Diam. from +2 ft. to 197 ft. Gage 1/4"

PERFORATIONS:

Perforated? Yes No.
Type of perforator used Pre-perforated pipe
Size of perforations 1/4 in. by 2 in.
960 perforations from 112 ft. to 132 ft.
480 perforations from 168 ft. to 178 ft.

(7) SCREENS:

Well screen installed? Yes No
Manufacturer's Name _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WELL TESTS:

Drawdown is amount water level is lowered below static level - 41
Was a pump test made? Yes No If yes, by whom? driller
Yield: 700 gal./min. with 35 ft. drawdown after 8 hrs.
1000 " 49 " " 8 "
1500 " 60 " " 8 "
2000 gal./min. with 75 ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m.
Temperature of water _____ Depth artesian flow encountered _____ ft.

(9) CONSTRUCTION:

Well seal—Material used Cement
Well sealed from land surface to _____ 20 ft.
Diameter of well bore to bottom of seal 24 in.
Diameter of well bore below seal 24 in.
Number of sacks of cement used in well seal 30 sacks
How was cement grout placed? _____
Pressure grout pump
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: 3/4
Gravel placed from 20 ft. to 197 ft.

(10) LOCATION OF WELL:

County Marian Driller's well number _____
1/4 Section 26 T. 4S R. 1W W.M. _____
Bearing and distance from section or subdivision corner _____

(11) WATER LEVEL: Completed well.

Depth at which water was first found 85 ft.
Static level 41 ft. below land surface. Date 3/14/78
Artesian pressure _____ lbs. per square inch. Date _____

(12) WELL LOG:

Diameter of well below casing _____
Depth drilled 197 ft. Depth of completed well 197 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
Surface	0	3	
Brown clay	3	44	
Blue clay	44	85	
Red sand & gravel	85	91	
Blue sandy clay	91	99	
Black sand	99	105	
Sand & gravel	105	134	
Blue clay	134	164	
Black sand & gravel	164	179	
Blue clay	179	197	

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Work started Dec 16 19 77 Completed Mar. 14 19 78
Date well drilling machine moved off of well Mar 17 19 78

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] John T. Miller Date Mar 17, 1978
(Drilling Machine Operator)
Drilling Machine Operator's License No. 26

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 John T. Miller
(Person, firm or corporation) (Type or print)
Address 1780 Tomlin Ave. Woodburn, Ore 97071
[Signed] John T. Miller
(Water Well Contractor)
Contractor's License No. 277 Date Mar 17 19 78

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

WELL LABEL # 1 105628

OCT 29 2011

START CARD # 201752

OWPRD

(1) LAND OWNER Owner Well I.D.

First Name Last Name
Company Stauffer Farms INC.
Address 13851 Stauffer Rd. NE
City Hubbard State OR Zip 97032

(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 301 ft.

Table with columns: Dia, From, To, Material, SEAL, Amt, lbs. Rows show seal details for diameters 20 and 16.

How was seal placed: Method A B C D E
Other OAR 690-210-0340
Backfill placed from ft. to ft. Material
Filter pack from 141.75 ft. to 301 ft. Material gravel Size 4/12
Explosives used: Yes Type Amount

(6) CASING/LINER

Table with columns: Casing/Liner, Dia, From, To, Gauge, Std, Plstc, Wld, Thrd. Shows casing details for diameters 12 and 16.

Shoe Inside Outside Other Location of shoe(s) 141.75
Temp casing Yes Dia From To

(7) PERFORATIONS/SCREENS

Perforations Method torch
Screens Type v-wire Material stainless

Table with columns: Perf/Screen, Casing/Screen, Dia, From, To, Scrn/slot width, Slot length, # of slots, Tele/pipe size. Lists perforation details.

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

Table with columns: Pump/Bailer/Air/Flowing Artesian, Yield gal/min, Drawdown, Drill stem/Pump depth, Duration (hr). Shows test results for 600 gpm.

Temperature 53 F Lab analysis Yes By
Water quality concerns? Yes (describe below)
From To Description Amount Units

(9) LOCATION OF WELL (legal description)

County MARION Twp 4 S N/S Range 1 W E/W WM
Sec 26 SW 1/4 of the NW 1/4 Tax Lot 00500
Tax Map Number Lot
Lat or DMS or DD
Long or DMS or DD
Street address of well Nearest address
19328 Hwy 99E NE Hubbard, OR 97032

(10) STATIC WATER LEVEL

Table with columns: Existing Well / Predeepening, Completed Well, Date, SWL(psi), SWL(ft). Shows water level data for 05-03-2011 with SWL of 55 ft.

(11) WELL LOG

Table with columns: Material, From, To, Ground Elevation. Lists well log materials from Topsoil to Clay gray & blue.

Date Started 11-05-2010 Completed 05-03-2011

(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 1704 Date
Password: (if filing electronically)
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 783 Date 6/2/11
Password: (if filing electronically)
Signed
Contact Info (optional) Cressen Well Drilling P.O.Box 526 Woodburn, OR 97071

ORIGINAL FILED IN THE WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 0.88

JUN 06 2011

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WELL I.D. # L 105628

OCT 29 2021

WATER SUPPLY WELL REPORT - continuation page

START CARD # 201752

(5) BORE HOLE CONSTRUCTION

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

FILTER PACK

From	To	Material	Size

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

(7) PERFORATIONS/SCREENS

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

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

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

Water Quality Concerns

From	To	Description	Amount	Units

(10) STATIC WATER LEVEL

Water Bearing Zones

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

QWRD

(11) WELL LOG

Material	From	To
Clay blue sticky	183	193
Clay gray sandy	193	198
Clay dark green silty	198	209
Clay blue-green hard	209	211
Gravel & basalt	211	213
Clay green & gravel	213	219
Clay green sticky	219	224
Clay green hard	224	234
Clay green hard & gravel	234	243
Gravel cemented w/some clay gray	243	244.5
Clay sticky gray	244.5	246
Clay green & gray sticky	246	249
Clay soft green & clay gray sandy, small gravel	249	252
Clay green, gray, brown & gravel	252	254
Clay green, brown, soft	254	258
Clay green, gray, sticky	258	259
Clay gray sticky hard	259	267
Clay green, gray, sticky w/seams of fine black sand	267	270
Clay green sandy & gravel	270	272
Clay gray sticky	272	278
Clay gray, sand & gravel	278	279
Clay blue sticky hard	279	292
Clay black hard	292	299
Clay blue sticky hard	299	301

Comments/Remarks

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WATER RESOURCES DEPT SALEM, OREGON

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

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AUG 28 1970

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SEP 16 1970

STATE ENGINEER, SALEM, OREGON within 30 days from the date of well completion.

STATE ENGINEER SALEM, OREGON 6-6406

STATE ENGINEER SALEM, OREGON

(1) OWNER:

Name Stauffer Bros.
Address Hubbard, Oregon

(2) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
If abandonment, describe material and procedure in Item 12.

(3) TYPE OF WELL:

Rotary Cable Dug Driven Jetted Bored

(4) PROPOSED USE (check):

Domestic Industrial Municipal Irrigation Test Well Other

CASING INSTALLED:

Threaded Welded
22" Diam. from 0 ft. to 80 ft. Gage 1/4"
12" Diam. from 0 ft. to 146 ft. Gage 1/4"
" Diam. from " ft. to " ft. Gage "

(6) PERFORATIONS:

Perforated? Yes No.
Type of perforator used Millknife
Size of perforations 3/8 in. by 5 in.
360 perforations from 104 ft. to 130 ft.
perforations from " ft. to " ft.
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 _____
Type _____ Model No. _____
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(8) WATER LEVEL: Completed well.

Static level 49 ft. below land surface Date 7/15/70
Gauge pressure _____ lbs. per square inch Date _____

(9) WELL TESTS:

Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No. If yes, by whom? driller
Yield: 1050 gal./min. with 23 ft. drawdown after 4 hrs.
1700 " " 49 " " 4 " "
" " " " " " "
" " " " " " "
Bailer test _____ gal./min. with _____ ft. drawdown after _____ hrs.
Artesian flow _____ g.p.m. Date _____
Temperature of water _____ Was a chemical analysis made? Yes No

(10) CONSTRUCTION:

Well seal—Material used Well Gel Bentonite
Depth of seal 80 ft.
Diameter of well bore to bottom of seal 25 in.
Were any loose strata cemented off? Yes No Depth _____
Was a drive shoe used? Yes No
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: 1/4-round
Gravel placed from 70 ft. to 146 ft.

(11) LOCATION OF WELL:

County Marian Driller's well number _____
1/4 Section 26 T. 4S R. 1W W.M. _____
Bearing and distance from section or subdivision corner _____

(12) WELL LOG:

Diameter of well below casing _____
Depth drilled 146 ft. Depth of completed well 146 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 as drilling proceeds. Note drilling rates.

MATERIAL	From	To	SWL
Surface	0	3	
Brown sandy clay	3	45	
Blue sandy clay	45	81	
Broken sand & gravel	81	86	
Blue sandy clay	86	89	
Sand	89	102	
Sand & gravel	102	139	
Blueclay	139	146	

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Work started June 10 1970 Completed July 15 1970
Date well drilling machine moved off of well July 15 1970

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] John T. Miller Date July 20, 1970
(Drilling Machine Operator)

Drilling Machine Operator's License No. 26

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 John Truman Miller (Type or print)
(Person, firm or corporation)

Address P.O. Box 342 Hubbard, Oregon

[Signed] John T. Miller (Water Well Contractor)

Contractor's License No. 277 Date July 20, 1970

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

MARI 69905

WELL I.D. LABEL# 132871
START CARD # 1049510
ORIGINAL LOG #

6/11/2021

(1) LAND OWNER
Owner Well I.D.
First Name JEFF Last Name BIZON
Company STAFFER FARM INC.
Address 13851 STAUFFER RD. NE
City HUBBARD State OR Zip 97032

(2) TYPE OF WORK
[X] New Well [] Deepening [] Conversion
[] Alteration (complete 2a & 10) [] Abandonment (complete 5a)

(2a) PRE-ALTERATION
Dia + From To Gauge Stl Plstc Wld Thrd
Casing: [] [] [] [] [] [] [] []
Material From To Amt sacks/lbs
Seal: [] [] [] [] [] [] [] []

(3) DRILL METHOD
[] Rotary Air [] Rotary Mud [X] Cable [] Auger [] Cable Mud
[] Reverse Rotary [] Other

(4) PROPOSED USE
[] Domestic [X] Irrigation [] Community
[] Industrial/ Commercial [] Livestock [] Dewatering
[] Thermal [] Injection [] Other

(5) BORE HOLE CONSTRUCTION
Special Standard [] (Attach copy)
Depth of Completed Well 247.40 ft.
BORE HOLE SEAL sacks/ lbs
Dia From To Material From To Amt lbs
20 0 38 Bentonite Chips 0 38 2350 P
16 38 292 Calculated 2350
Calculated

How was seal placed: Method [] A [] B [] C [] D [] E
[X] Other OAR 690-210-0340
Backfill placed from 247.4 ft. to 292 ft. Material CEMENT
Filter pack from 195 ft. to 200 ft. Material GRAVEL Size 6/9
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
12 [X] 2.5 247.4 .250 [] [] [X] []
16 [X] 1.3 194.3 .375 [] [] [X] []
Shoe [] Inside [X] Outside [] Other Location of shoe(s) 194.3
Temp casing [] Yes Dia From + To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type v wire Material Stainless
Perf/ Casing/ Screen Scrn/slot Slot # of Tele/
Screen Liner Dia From To width length slots pipe size
Screen Casing 12 195 209.3 .065
Screen Casing 12 209.3 226.5 .25

(8) WELL TESTS: Minimum testing time is 1 hour
Pump [X] Bailer [] Air [] Flowing Artesian []
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr)
1075 107 186 5
Temperature 54 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount 144 ppm
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County MARION Twp 4.00 S N/S Range 1.00 W E/W WM
Sec 35 NW 1/4 of the NW 1/4 Tax Lot 600
Tax Map Number Lot
Lat " or " DMS or DD
Long " or " DMS or DD
[] Street address of well [] Nearest address
13617 WHISKEY HILL RD. NE
HUBBARD OR

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 1/20/2021 59.6
Flowing Artesian? [] Dry Hole? []
WATER BEARING ZONES Depth water was first found 117.00
SWL Date From To Est Flow SWL(psi) + SWL(ft)
10/30/2020 117 128 100 58
11/9/2020 174 183 80 58
11/11/2020 195 226 1250 59

(11) WELL LOG
Ground Elevation
Material From To
Top soil RECEIVED 0 1
Clay, brown, hard 1 7
Clay, brown, hard 7 13
Clay, brown, sandy, hard OCT 29 2021 13 18
Clay, brown, med. 18 36
clay, light yellowish brown, 36 42
Clay, greenish gray, soft OWRD 42 61
Silt, dark gray, med. 61 70
Silt and sand, dark gray, hard 70 78
Silt, dark brown, soft 78 82
Clay, gray, hard, sticky 82 84
Clay, dark gray, soft 84 89
Sand and dark gray silt, hard 89 103
Clay, dark gray, hard, sticky 103 108
Clay, dark greenish gray, hard 108 114
Sand and gravel, claybound 114 117
Gravel and sand, black, loose 117 128
Clay, dark greenish gray, med, sticky 128 144
Clay, dark greenish gray, hard, sticky 144 156

Date Started 10/21/2020 Completed 1/20/2021
(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

(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 783 Date 6/11/2021
Signed IVAN GROSSEN (E-filed)
Contact Info (optional) 13859

NOTICE TO WATER WELL CONTRACTOR
The original and first copy
of this report are to be
filed with the
STATE ENGINEER, SALEM, OREGON 97310
within 30 days from the date
of well completion.

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JUL 14 1965
STATE ENGINEER
SALEM OREGON

MARI 10/13

WATER WELL REPORT

State Well No. 4/10-35C
State Permit No. G-3722

(1) OWNER:
Name Stauffer Bros.
Address Hubbard, Oregon

(2) LOCATION OF WELL:
County Marian Driller's well number
1/4 Section 26 T. 4S R. 1W W.M.
Bearing and distance from section or subdivision corner

(3) TYPE OF WORK (check):
New Well Deepening Reconditioning Abandon
Abandonment, describe material and procedure in Item 12.

(4) PROPOSED USE (check):
Domestic Industrial Municipal
Irrigation Test Well Other

(5) TYPE OF WELL:
Rotary Driven
Cable Jetted
Dug Bored

(6) CASING INSTALLED: Threaded Welded
12" Diam. from 0 ft. to 120 ft. Gage 1 1/4"
8" Diam. from 0 ft. to 80 ft. Gage 1 1/4"

(7) PERFORATIONS: Perforated? Yes No
Type of perforator used Millknife
Size of perforations 1/2 in. by 2 1/2 in.
315 perforations from 83 ft. to 112 ft.

(8) SCREENS: Well screen installed? Yes No
Manufacturer's Name _____ Model No. _____
Type _____
Slot size _____ Set from _____ ft. to _____ ft.
Diam. _____ Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:
Well seal—Material used in seal Puddled mud
Depth of seal 18 ft. Was a packer used? no
Diameter of well bore to bottom of seal 24 in.
Were any loose strata cemented off? Yes No Depth _____
Was a drive shoe used? Yes No
Was well gravel packed? Yes No Size of gravel: 1/4
Gravel placed from 80 ft. to 105 ft.
Did any strata contain unusuable water? Yes No
Type of water? _____ depth of strata _____
Method of sealing strata off _____

(10) WATER LEVELS:
Static level 34 ft. below land surface Date 7/2/65
Artesian pressure _____ lbs. per square inch Date _____

(11) WELL TESTS: Drawdown is amount water level is lowered below static level
Was a pump test made? Yes No If yes, by whom? driller
Yield: 400 gal./min. with 81 ft. drawdown after 6 hrs.
" 250 " " 51 " " 6 "
" " " " " " "
Bailer test gal./min. with ft. drawdown after hrs.
Artesian flow g.p.m. Date
Temperature of water Was a chemical analysis made? Yes No

(12) WELL LOG: Diameter of well below casing 12
Depth drilled 136 ft. Depth of completed well 136 ft.
Formation: Describe by color, character, size of material and structure, and show thickness of aquifers and the kind and nature of the material in each stratum penetrated, with at least one entry for each change of formation.

MATERIAL	FROM	TO
Surface	0	3
Brown sandy clay	3	43
Blue sandy clay	43	82
Broken sand and gravel	82	86
Blue sandy clay	86	92
Red sand	92	97
Black sand	97	102
Broken gravel	102	112
Blue clay	112	136

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OCT 29 2021

OWRD

Work started June 2 19 65 Completed July 2 19 65
Date well drilling machine moved off of well July 2 19 65

(13) PUMP:
Manufacturer's Name _____
Type: _____ H.P. _____

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 John Truman Miller
(Person, firm or corporation) (Type or print)
Address P O Box 42 Hubbard, Oregon

Drilling Machine Operator's License No. 277
[Signed] John T. Miller
(Water Well Contractor)
Contractor's License No. 26 Date 12/2/65 19 65
277