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

Application for Groundwater Registration Modification

Part 1 of 5 – Minimum Requirements Checklist

This Groundwater Registration Modification application will be returned if Parts 1 through 4 and all required attachments are not completed and included.
For questions, please call (503) 986-0900, and ask for Transfer Section.

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

☒ Part 1 – Completed Minimum Requirements Checklist.

☒ Part 2 – Completed Application Map Checklist.

☒ Part 3 – Completed Applicant Information and Signature.

☒ Part 4 – Completed Groundwater Registration Modification Application – Groundwater Registration Information. (Only one Groundwater registration per application, unless the Groundwater registrations to be modified are layered).

☒ Completed Groundwater Registration Modification Application Map (Does not have to be prepared by a Certified Water Right Examiner).

☒ Groundwater registration modification fees – Amount enclosed: $ **1,250**.
($875.00 for a place of use change only; $1,250.00 for any other change or combination).

Attachments:

☐ ☒ N/A Request for Assignment Form and statutory fee. This form needs to be completed if the applicant owns the land to which the registration is appurtenant and is **not** the registration certificate holder of record. The Request for Assignment Form is available at https://www.oregon.gov/OWRD/Forms/Pages/default.aspx.

Assignment is not needed for any person or entity who can demonstrate authorization to request recognition of a modification (e.g. legal representative, power of attorney, agent, etc.) **or** the applicant is named on the certificate of registration, or has been assigned to the certificate of registration.

☒ ☐ N/A Oregon Water Resources Department's Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.

☒ ☐ N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.

(For Staff Use Only)
WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

___ Application fee not enclosed/insufficient
___ Map not included or incomplete
___ Land Use Form not enclosed or incomplete
___ Assignment Form and fee not enclosed/insufficient
___ Additional signature(s) required
___ Part _____ is incomplete
Other/Explanation _____
Staff: 503-986-0 Date: / /

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Part 2 of 4 – Groundwater Registration Modification Map Checklist

Your Groundwater Registration Modification application will be returned if any of the map requirements listed below are not met.

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

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

Part 3 of 4 – Applicant Information and Signature

Applicant Information

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Stauffer Farm Inc. and CNR Farms Inc. c/o ~~Jeff Bizon~~ Cor Sheryl Stauffer			**(503) 476-4712**	
ADDRESS				FAX NO.
13851 Stauffer Road NE				
CITY	STATE	ZIP	E-MAIL	
Hubbard	**OR**	**97032**		
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

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

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Doann Hamilton/Pacific Hydro-Geology, Inc.			**(503) 632-5016**	**(503) 349-6946 (cell)**
ADDRESS				FAX NO.
18487 S. Valley Vista Road				**(503) 632-5983**
CITY	STATE	ZIP	E-MAIL	
Mulino	**OR**	**97042**	**phgdmh@gmail.com**	
BY PROVIDING AN E-MAIL ADDRESS, CONSENT IS GIVEN TO RECEIVE ALL CORRESPONDENCE FROM THE DEPARTMENT ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.				

Explain in your own words what you propose to accomplish with this modification; and why:
We wish to change the point of appropriation for this GR from the authorized well to several other existing wells on the farm in order to create a well field and allow the use of any of our wells individually or in any combination to irrigate over the entire farm property.

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)

(Check one box)

☒ By signing this application, I (we) understand that, upon receipt of the draft preliminary determination and prior to Department approval of the Groundwater modification, I (we) will be required to provide landownership information and evidence that I am authorized to pursue the modification as identified in OAR 690-382-0400(16)(a); **OR**

☐ I (we) affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**

☐ I (we) affirm that the applicant is an entity with the authority to condemn property and is acquiring the property to which the Groundwater registration proposed for modification is appurtenant by condemnation and have attached supporting documentation.

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I understand that prior to Department approval of the groundwater registration modification, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the groundwater registration is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following paper: Woodburn Independent.

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

Sheryl A Stauffer	SHERYL A STAUFFER, SEC	09/28/2021
Applicant Signature	Print Name *and title if applicable*	Date
Applicant Signature	Print Name *and title if applicable*	Date

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located? ☐ Yes ☒ No *If NO, include signatures of all deeded landowners (and mailing*

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and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has been conveyed.

Check the appropriate box, if applicable:

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

IRRIGATION DISTRICT NAME **NA**	ADDRESS	
CITY	STATE	ZIP

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

ENTITY NAME **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 4 of 4 – Groundwater Registration Information

Please use a separate Part 4 for each registration being modified. See instructions on page 5, to copy and paste additional Part 4s, or to add additional rows to tables within the form.

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

POA Name or Number	Is this POA Authorized by the registration or is it Proposed?	OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼	¼	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Authorized Well	☒ Authorized ☐ Proposed	**MARI 1016, 69473**	**4**	**S**	**1**	**W**	**35**	**NW**	**NW**	**DLC 63**	**1,442 feet north and 1,504 feet east from the SW corner, DLC 63.**
Well 1	☐ Authorized ☒ 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	☐ Authorized ☒ 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	☐ Authorized ☒ 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	☐ Authorized ☒ 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	☐ Authorized ☒ 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	☐ Authorized ☒ 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 modifications(s) proposed below (modification "CODES" are provided in parentheses):

☐ Place of Use (POU)
☒ Point of Appropriation (well) (POA)
☐ Character of Use (USE)
☐ Additional Point of Appropriation (APOA)

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

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

☒ No Complete all of Table 2 to describe the portion of the registration to be changed.

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Please use and attach additional pages of Table 2 as needed. See page 5 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 Modifications to Registration GR-751 (Certificate # GR-727)

List only the part of the registration that will be modified. For the acreage in each ¼ ¼, list the modification proposed. If more than one modification, specify the acreage associated with each modification. If more than one POA, specify the acreage associated with each POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears in the registration BEFORE PROPOSED CHANGES. List only that part or portion of the groundwater registration 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	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	POA(s) to be used (from Table 1)	Priority Date
4	S	1	W	34	NE	NE	100, 600	DLC 63	25.0	IR	Authorized Well	10-31-46	POA	4	S	1	W	34	NE	NE	100, 600	DLC 63	25.0	IR	Wells 1, 2,3,4,5, & 6	10-31-46
4	S	1	W	34	SE	NE	600	DLC 63	22.5	IR	Authorized Well	10-31-46	POA	4	S	1	W	34	SE	NE	600	DLC 63	22.5	IR	Wells 1, 2,3,4,5, & 6	10-31-46
4	S	1	W	35	NW	NW	600	DLC 63	3.98	IR	Authorized Well	10-31-46	POA	4	S	1	W	35	NW	NW	600	DLC 63	3.98	IR	Wells 1, 2,3,4,5, & 6	10-31-46
4	S	1	W	35	SW	NW	600	DLC 63	23.0	IR	Authorized Well	10-31-46	POA	4	S	1	W	35	SW	NW	600	DLC 63	23.0	IR	Wells 1, 2,3,4,5, & 6	10-31-46
TOTAL ACRES									74.48					TOTAL ACRES									74.48			

Additional remarks: **None.**

For a modification in place of use or character of use:
Are there other water right certificates, water use permits, or Groundwater registrations associated with the "from" or "to" lands? ☒ Yes ☐ No

If YES, list the other certificate, water use permit, or other Groundwater registration numbers:
CERTIFICATE 56269

Pursuant to OAR 690-382-0200, any "layered" water use, such as an irrigation right that is supplemental to a primary irrigation right proposed for transfer, must be concurrently transferred with the registration or be cancelled. Any change to a water right must be filed separately in a transfer application. Any change to a water use permit must be filed separately with a permit amendment. Any modification to a Groundwater registration on the "to" lands must be filed separately with a Groundwater registration modification.

For modifications in point(s) of appropriation (well(s) or additional point(s) of appropriation:

☒ Well log(s) are attached for each well that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (**Tip**: You may search for well logs on the Department's web page at: http://apps.wrd.state.or.us/apps/gw/well_log/)

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AND/OR

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

Table 3. Construction of Point(s) of Appropriation
Any well(s) in this listing must be clearly tied to corresponding well(s) described in Table 1 and shown on the accompanying application map. Failure to provide adequate information is likely to delay the processing of your modification application until it is received. The information is necessary for the department to assess whether the proposed well(s) will access the same source aquifer as the authorized point(s) of appropriation (POA). The Department is prohibited by law from approving POA changes that do not access the same source aquifer.

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well, OWRD Well ID Tag No. L-___	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
Authorized Well	**YES**	**MARI 1016, 69473**	**Abandoned - See Well Log MARI 1016, 69473**							
Well 1	**YES**	**MARI 765**	**See Well Log MARI 765**							**Not less than full rate**
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**							

Application for Water Right
Transfer
Consent by Deeded Landowner

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

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State of Oregon)
)ss
County of Marion)

I Jeff Bizon of CNR Farms Inc. in my/our capacity as owner,

mailing address 13851 Stauffer Rd NE, Hubbard, OR 97032,

telephone number (503) 476-4712, duly sworn depose and say that I

consent to the proposed change(s) to Water Right Certificate Number GR-751

described in a Transfer Application (T-NA) submitted by Stauffer Farms Inc.,
(transfer number, if known)

on the property in tax lot number(s) 100, Section 34, Township 4 South, Range 1 West, W.M., located at no site address – near southwest corner of TL 041W27, lot 1200, address 13851 Stauffer Rd NE. Hubbard, OR 97032.
(site address)

on the property in tax lot number(s) 300, Section 35, Township 4 South, Range 1 West, W.M., located at no site address – east of Tl 041W34 100.

Signature of Affiant — Date: July 15, 2021

Signature of Affiant — Date

Subscribed and Sworn to before me this 15 day of July, 2021.

OFFICIAL STAMP
TANYA ANN MCCALL
NOTARY PUBLIC - OREGON
COMMISSION NO. 987708
MY COMMISSION EXPIRES MAY 22, 2023

Notary Public for Oregon

My commission expires May 22, 2023

Revised 9/2/10

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STATE ENGINEER
Salem, Oregon

MART 1016

Well Record

STATE WELL NO. 4/1W-35D(1)
COUNTY Marion
APPLICATION NO. GR-751

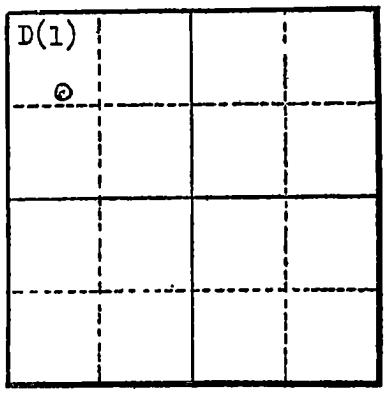
OWNER: Boyd E. Brown

MAILING ADDRESS: Route 1

CITY AND STATE: Hubbard, Oregon

LOCATION OF WELL: Owner's No. 1

NE ¼ NE ¼ Sec. 35 T. 4 N./S., R. 1 E./W., W.M.



Bearing and distance from section or subdivision corner 1504' E. & 1442' N. from SW cor. Wm. Vanderwacker DLC

Altitude at well 160' Interpolated

TYPE OF WELL: Drilled Date Constructed Oct. 46

Depth drilled 210' Depth cased 210'

Section 35

CASING RECORD:

12 inch steel casing 0 to 210 feet

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FINISH:

Perforated 100 to 110' 200 to 210'

AQUIFERS:

WATER LEVEL:

60 feet

PUMPING EQUIPMENT: Type Elec. turbine H.P. 15
Capacity 300 G.P.M.

WELL TESTS:
Drawdown 40 ft. after hours 250 G.P.M.
Drawdown ft. after hours G.P.M.

USE OF WATER Irrigation Temp. °F., 19
SOURCE OF INFORMATION GR-751
DRILLER or DIGGER Strasser, Portland
ADDITIONAL DATA:
Log None Water Level Measurements Chemical Analysis Aquifer Test

REMARKS:

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State Printing 69316

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

MARI 69473

10/20/2020

WELL I.D. LABEL# L
START CARD # 1049411
ORIGINAL LOG #

(1) LAND OWNER

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

(2) TYPE OF WORK

☐ 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 ☐ Cable ☐ Auger ☐ Cable Mud
☐ Reverse Rotary ☒ Other PUMP HOIST

(4) PROPOSED USE

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

(5) BORE HOLE CONSTRUCTION

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

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

How was seal placed: Method ☐ A ☐ B ☐ C ☐ D ☐ E
☐ Other
Backfill placed from _____ ft. to _____ ft. Material
Filter pack from _____ ft. to _____ ft. Material _____ Size _____
Explosives used: ☐ Yes Type _____ Amount _____

(5a) ABANDONMENT USING UNHYDRATED BENTONITE

Proposed Amount Actual Amount

(6) CASING/LINER

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

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

(7) PERFORATIONS/SCREENS

Perforations Method _____
Screens Type _____ Material _____

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

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

◯ Pump ◯ Bailer ◯ Air ◯ Flowing Artesian

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

Temperature 53 °F Lab analysis ☐ Yes By _____
Water quality concerns? ☐ Yes (describe below) TDS amount 87 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 45.18444897 DMS or DD
Long ° ' " or -122.78217715 DMS or DD
◯ Street address of well ◯ Nearest address
13617 WHISKEY HILL RD. NE , HUBBARD, OREGON

(10) STATIC WATER LEVEL

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Pre-Alteration	10/14/2020			66
Completed Well				

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found _____

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

(11) WELL LOG

Ground Elevation _____

Material	From	To

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Date Started 10/13/2020 Completed 10/14/2020

(unbonded) Water Well Constructor Certification

I certify that the work I performed on the construction, deepening, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.

License Number _____ Date _____

Signed _____

(bonded) Water Well Constructor Certification

I accept responsibility for the construction, deepening, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.

License Number 783 Date 10/20/2020

Signed IVAN GROSSEN (E-filed)

Contact Info (optional) _____

19861

ORIGINAL - WATER RESOURCES DEPARTMENT

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

WATER SUPPLY WELL REPORT - continuation page

MARI 69473

10/20/2020

WELL I.D. LABEL# L
START CARD # 1049411
ORIGINAL LOG #

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

Material	From	To	Amt	sacks/lbs

Water Quality Concerns

From	To	Description	Amount	Units

(5) BORE HOLE CONSTRUCTION

BORE HOLE Dia	From	To

SEAL Material	From	To	Amt	sacks/lbs
		Calculated		
		Calculated		
		Calculated		
		Calculated		

FILTER PACK

From	To	Material	Size

(10) STATIC WATER LEVEL

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

(11) WELL LOG

Material	From	To

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(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

(7) PERFORATIONS/SCREENS

Perf/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/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)

Comments/Remarks

Well Was abandoned, Perforated from 3' to 210 feet with 560 perforations and Pressure Grouted with Portland cement grout and 5% bentonite.

Original well report Mari 1016

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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.

MAR 765

WATER WELL REPORT
STATE OF OREGON
(Please type or print)
(Do not write above this line)

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MAR 20 1978
WATER RESOURCES DEPT.
SALEM, OREGON

State Well No. 4S/1W-26
State Permit No. G-8085 Appl. G-8774

(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 ☒ Driven ☐
Cable ☐ Jetted ☐
Dug ☐ 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"
" Diam. from ft. to ft. Gage

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.
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) 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:	gal./min. with	ft. drawdown after	hrs.
700	35	8	
1000	49	8	
1500	60	8	
2000	75		

Bailer test gal./min. with 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 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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OWRD

Work started Dec 16 1977 Completed Mar. 14 1978
Date well drilling machine moved off of well Mar 17 1978

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 (Drilling Machine Operator) Date Mar 17, 1978
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, 1978

(USE ADDITIONAL SHEETS IF NECESSARY) 13861

SP*45656-119

MARI 63689

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

WELL LABEL # L 105628

START CARD # 201752

(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/ Commericial ☐ Livestock ☐ Dewatering ☐ Thermal ☐ Injection ☐ Other _____

(5) BORE HOLE CONSTRUCTION

Special Standard ☐ (Attach copy)

Depth of Completed Well 301 ft.

BORE HOLE Dia	From	To	SEAL Material	From	To	Amt	sacks/ lbs
20	0	48	Bentonite	0	48	86	S
16	48	301					

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

Casing	Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd
◉	○	12	☒	2	301	.250	◉	○	☒	☐
◉	○	16	☒	1	141.75	.375	◉	○	☒	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐
○	○		☐				○	○	☐	☐

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

Perf/ Screen	Casing/ Screen Liner	Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ pipe size
Screen		12	142	147.36	.085			
Screen		12	158.69	173	.085			
Perf		12	247.83	252.83	.125	6	112	
Perf		12	265.83	272.83	.125	6	144	
Perf		12	276.83	279.83	.125	6	54	

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

◉ Pump ○ Bailer ○ Air ○ Flowing Artesian

Yield gal/min	Drawdown	Drill stem/Pump depth	Duration (hr)
600	77.2		1
600	85.5		3
600	86.2		4

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

	Date	SWL(psi)	+	SWL(ft)
Existing Well / Predeepening				
Completed Well	05-03-2011			55

Flowing Artesian? ☐ Dry Hole? ☐

WATER BEARING ZONES Depth water was first found 94

SWL Date	From	To	Est Flow	SWL(psi)	+	SWL(ft)
11-29-2010	94	122	350			49
12-09-2010	143	173	600			55
01-27-2011	252	279	40			55

(11) WELL LOG

Ground Elevation _____

Material	From	To
Topsoil	0	1
Clay brown silty	1	73
Sand brown fine & silt	73	83
Sand fine & silt gray	83	84
Sand black	84	85
Clay gray & sand	85	89
Clay green sticky	89	94
Sand black	94	111
Sand 60% & gravel to 4"	111	122
Clay green, sand & gravel	122	126
Clay green	126	134
Clay gray silty	134	137
Clay sand & gravel	137	143
Sand black	143	147
Clay green & gray sticky	147	159
Sand black med.fine	159	164
Sand & gravel	164	173
Clay gray	173	177
Clay gray & blue	177	183

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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) Crossen Well Drilling P.O.Box 526 Woodburn, OR 97071

ORIGINAL & FIRST COPY TO WATER RESOURCES DEPARTMENT

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

Form Version: 0.88

RECEIVED JUN 06 2011 WATER RESOURCES DEPT SALEM, OREGON

13861

MARI 63689

WATER SUPPLY WELL REPORT - continuation page

WELL I.D. # L 105628

START CARD # 201752

(5) BORE HOLE CONSTRUCTION

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

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	Scrn/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)

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(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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JUN 06 2011

WATER RESOURCES DEPT
SALEM, OREGON

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

RECEIVED AUG 28 1970 STATE ENGINEER SALEM, OREGON

WATER WELL REPORT
STATE OF OREGON
(Please type or print)
Please write above this line.

RECEIVED SEP 16 1970 STATE ENGINEER SALEM, OREGON

MAR 7 67

State Well No. 4/1W-26

Permit No. 6-6406

(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 ☒ Driven ☐
Cable ☐ Jetted ☐
Dug ☐ 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

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
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 "
" " "
Baller 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 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	

RECEIVED OCT 29 2021 OWRD

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 (Drilling Machine Operator) Date July 20, 1970
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 (Person, firm or corporation) (Type or print)
Address P.O. Box 342 Hubbard, Oregon
[Signed] John T. Miller (Water Well Contractor)
Contractor's License No. 277 Date July 20, 1970

(USE ADDITIONAL SHEETS IF NECESSARY)

13661

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.

MAR 1764

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WATER WELL REPORT

STATE OF OREGON AUG 21 1974 State Well No. 45/1W-26

(Please type or print) STATE ENGINEER State Permit No. 6-8128

(Do not write above this line) SALEM, OREGON

(1) OWNER:

Name Stauffer Bros.

Address 462 4th
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 ☐ Driven ☐
Cable ☒ Jetted ☐
Dug ☐ Bored ☐

(4) PROPOSED USE (check):

Domestic ☒ Industrial ☐ Municipal ☐
Irrigation ☐ Test Well ☐ Other ☐

CASING INSTALLED:

Threaded ☐ Welded ☒

12" Diam. from 0 ft. to 205 ft. Gage .250

" Diam. from ft. to ft. Gage

" Diam. from ft. to ft. Gage

PERFORATIONS:

Perforated? ☒ Yes ☐ No.

Type of perforator used Mills Knife

Size of perforations 3/8 in. by 3/4 in.

192 perforations from 112 ft. to 123 ft.

300 perforations from 184 ft. to 201 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) WELL TESTS:

Drawdown is amount water level is lowered below static level

Was a pump test made? ☒ Yes ☐ No If yes, by whom? Stettlers

Yield: 650 gal./min. with 52 ft. drawdown after 8 hrs.

" " "

" " "

Baller test gal./min. with 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 15 in.

Diameter of well bore below seal 12 in.

Number of sacks of cement used in well seal 20 sacks

Number of sacks of bentonite used in well seal sacks

Brand name of bentonite

Number of pounds of bentonite per 100 gallons of water lbs./100 gals.

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:

Gravel placed from ft. to ft.

(10) LOCATION OF WELL:

County Marion Driller's well number

¼ ¼ 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 96 ft.

Static level 53 ft. below land surface. Date 7-30-74

Artesian pressure lbs. per square inch. Date

(12) WELL LOG:

Diameter of well below casing

Depth drilled 205 ft. Depth of completed well 205 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
Top soil	0	2	
Brown clay	2	21	
Brown sandy clay	21	56	
Blue clay	56	73	
Grey sandy clay	73	79	
Black silt	79	84	
Grey clay	84	96	
Black sand	96	105	
Sand and Gravel	105	112	
Gravel	112	123	
Grey clay	123	136	
Grey sandy clay	136	141	
Black silt	141	147	
Grey sandy clay	147	167	
Black sand	167	176	
Grey clay	176	184	
Black sand & gravel	184	202	
Grey clay	202	205	

RECEIVED OCT 29 1974 OWRD

Work started 5-17 1974 Completed 7-30 1974

Date well drilling machine moved off of well 7-30 1974

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] Richard L. Wright (Drilling Machine Operator) Date 7-30, 1974

Drilling Machine Operator's License No. 761

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 William D. Christenson Jr. (Person, firm or corporation) (Type or print)

Address P.O. Box 343 Hubbard, Oregon

[Signed] William D. Christenson (Water Well Contractor)

Contractor's License No. 511 Date 7-30, 1974

(USE ADDITIONAL SHEETS IF NECESSARY) 13861

SP*45656-119

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

MARI 69905
6/11/2021

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

(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/ Commericial [ ] Livestock [ ] Dewatering
[ ] Thermal [ ] Injection [ ] Other

(5) BORE HOLE CONSTRUCTION
Special Standard [ ] (Attach copy)
Depth of Completed Well 247.40 ft.

BORE HOLE

Dia	From	To
20	0	38
16	38	292

SEAL

Material	From	To	Amt	sacks/lbs
Bentonite Chips	0	38	2350	P
		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/ Screen	Casing/ Liner	Screen Dia	From	To	Scrn/slot width	Slot length	# of slots	Tele/ 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 ( ) 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	0	1
Clay, brown, hard	1	7
Clay, brown, hard	7	13
Clay, brown, sandy, hard	13	18
Clay, brown, med.	18	36
clay, light yellowish brown,	36	42
Clay, greenish gray, soft	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

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

ORIGINAL - WATER RESOURCES DEPARTMENT
THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version: 1/3/2017

13861

WATER SUPPLY WELL REPORT - continuation page

MARI 69905

6/11/2021

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

(2a) PRE-ALTERATION

Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

Material	From	To	Amt	sacks/lbs

Water Quality Concerns

From	To	Description	Amount	Units

(5) BORE HOLE CONSTRUCTION

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

FILTER PACK

From	To	Material	Size
200	247	GRAVEL	1/4"

(10) STATIC WATER LEVEL

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

(6) CASING/LINER

Casing Liner	Dia	+	From	To	Gauge	Stl	Plstc	Wld	Thrd

(11) WELL LOG

Material	From	To
Dark green and gray silt, bedded	156	165
Dark green and gray silt, bedded, hard	165	167
Sand, black, fine, silt bound, hard	167	174
Sand, black, dark gray silt, bedded	174	183
Silt, greenish gray, hard, dry	183	185
Silt, gray, hard, dry	185	187
Clay, greenish gray, hard, sticky	187	195
Sand, black, pummace, greenish gray silt	195	201
Sand and gravel, black	201	226
Clay, dark gray, med, sticky	226	228
Clay, greenish gray, hard, sticky	228	256
Clay, light brown, hard, sticky	256	262
Clay, gray, med, sticky	262	267
Clay, greenish gray, hard, sticky	267	292

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(7) PERFORATIONS/SCREENS

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

Comments/Remarks

Bottom plate 247.4'
Lift bar 1.5' from bottom

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

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

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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

WATER WELL REPORT
STATE OF OREGON
(Please type or print)

State Well No. 4/1W-26

State Permit No. G-3722

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

(2) LOCATION OF WELL:
County Marian Driller's well number
¼ ¼ 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 ☐
If 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 ¼"
8 " Diam. from 0 ft. to 80 ft. Gage ¼"
" Diam. from ft. to ft. Gage

(7) PERFORATIONS:
Perforated? ☒ Yes ☐ No
Type of perforator used Millknife
Size of perforations ½ in. by 2½ in.
315 perforations from 83 ft. to 112 ft.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.
perforations from ft. to ft.

(8) 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.

(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: 1¼
Gravel placed from 80 ft. to 105 ft.
Did any strata contain unusable 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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Work started June 2 1965 Completed July 2 1965
Date well drilling machine moved off of well July 2 1965

(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 July 10, 1965

(USE ADDITIONAL SHEETS IF NECESSARY)

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