Application for

Groundwater Registration Modification



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

Part 1 of 5 - Minimum Requirements Checklist

This 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.

Check	c all inclu	ded with this application (N/A = Not Applicable)	RECEIVED
\boxtimes		Part 1 – Completed Minimum Requirements Checklist.	
\boxtimes		Part 2 – Completed Application Map Checklist.	SEP 2 2 2022
\boxtimes		Part 3 – Completed Applicant Information and Signature.	OWRD
		Part 4 – Completed Groundwater Registration Modification Application – C Registration Information. (Only one Groundwater registration per applicat Groundwater registrations to be modified are layered).	Groundwater
\boxtimes		Completed Groundwater Registration Modification Application Map (Does prepared by a Certified Water Right Examiner). Attachment #1	not have to be
\boxtimes		Groundwater registration modification fees – Amount enclosed: $$1,250.0$$ (\$875.00 for a place of use change only; \$1,250.00 for any other change or	
		Attachments:	
\boxtimes	□ N/A	Request for Assignment Form and statutory fee. This form needs to be conapplicant owns the land to which the registration is appurtenant and is no certificate holder of record. The Request for Assignment Form is available https://www.oregon.gov/OWRD/Forms/Pages/default.aspx .	t the registration
		Assignment is not needed for any person or entity who can demonstrate a request recognition of a modification (e.g. legal representative, power of a etc.) or the applicant is named on the certificate of registration, or has been certificate of registration.	attorney, agent,
	□ N/A	Oregon Water Resources Department's Land Use Information Form with a signature (or signed land use form receipt stub) from each local land use a water is to be diverted, conveyed, and/or used. Not required if water is to conveyed, and/or used only on federal lands or if all of the following apply place of use only, b) no structural changes, c) the use of water is for irrigat the use is located within an irrigation district or an exclusive farm use zone	uthority in which be diverted, c: a) a change in ion only, and d)
	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well point(s) of appropriation. Attachment #4	(s)) or additional
	Appli Land Addi	(For Staff Use Only) RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S): Ication fee not enclosed/insufficient Map not included or incomplete Use Form not enclosed or incomplete Assignment Form and fee not enclosed/in tional signature(s) required Part is incomplete planation 1 1 1	sufficient
	Staff:	503 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 <u>not</u> have to be prepared by a Certified Water Right Examiner. Check all boxes that apply.

\boxtimes		Permanent quality printed with dark ink on good quality paper.	
\boxtimes		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, 11×17 inches. For 30×30 inch maps, one extra copy is required.	
\boxtimes		A north arrow, a legend, and scale.	SEP 2 2 2022
		The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet assessor map if the scale is not smaller than 1 inch = 1,320 feet, or approved by the Department.	t, the county a scale that has been pre-
\boxtimes		Township, Range, Section, $\frac{1}{4}$ $\frac{1}{4}$, DLC, Government Lot, and other resurvey lines.	cognized public land
\boxtimes		Tax lot boundaries (property lines) are required. Tax lot numbers a	re recommended.
\boxtimes		Major physical features including rivers and creeks showing directive reservoirs, roads and railroads.	on of flow, lakes and
\boxtimes		Major water delivery system features from the point(s) of appropripile pipelines, canals, and ditches.	ation such as main
		Existing place of use that includes hachuring, priority date, and use acres in each quarter-quarter section, government lot, or in each quarter projected within government lots, donation land claims, or other resurvey subdivisions. If less than the entirety of the registration is be separate hachuring is needed for the portion of the registration left	uarter-quarter section as ecognized public land eing changed, a
	⊠ N/A	If you are proposing a modification in place of use, show the proposition in place of use, show the proposition in cluding priority date and use including number of acressection, government lot, or in each quarter-quarter section as projects, donation land claims, or other recognized public land survey section.	s in each quarter-quarter ected within government
\boxtimes		Existing point(s) of appropriation with distance and bearing or coorecognized survey corner.	rdinates from a
	□ N/A	If you are proposing a modification in point(s) of appropriation, she location and label it clearly with distance and bearing or coordinate are used, latitude-longitude coordinates may be expressed as either seconds with at least one digit after the decimal (example – 42°32′ decimal with five or more digits after the decimal (example – 42.53′)	es. If GPS coordinates er degrees-minutes- 15.5") or degrees-

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Part 3 of 4 – Applicant Information and Signature

Applicant Information

Applicant information						
APPLICANT/BUSINESS NAME			PHONE NO. ADDITIONAL CONTACT NO.			
Andrews Holdings LLC, Rob And	rews, Prin	cipal	206-343-9204			
ADDRESS				FAX NO.		
224 Westlake Avenue N, Suite 5						
CITY	STATE	ZIP	E-MAIL			
Seattle	WA	98109	rob@nwretail.com			
By providing an e-mail address, consent is given to receive all correspondence from the Department						
ELECTRONICALLY. COPIES OF THE FINAL ORDER DOCUMENTS WILL ALSO BE MAILED.						

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

APPLICANT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.	
Molly Reid - GeoEngineers, Inc			541-310-7264		
ADDRESS				FAX NO.	
8019 W. Quinault Avenue, Suite	e 201		1		
CITY	STATE	ZIP	E-MAIL		
Kennewick	WA	99336	mreid@geoengineers.com	m	
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: The existing well has caved in and cannot be repaired. We are proposing to construct a replacement well approximately 12 feet from the authorized well, and to the approximate depth as the authorized well. The original well will be properly decommissioned.

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

(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.						
I understand that prior to Department ap to submit payment to the Department for area where the groundwater registration qualifying newspaper is available, I suggest (we) affirm that the information contains Applicant Signature	or publication of a notice in a new is located, once per week for tweet est publishing the notice in the fo	wspaper with general ow wo consecutive weeks. ollowing paper: <u>Union</u>	circulation in the If more than one			
Applicant Signature	Print Name (and Title if applicable)	Date	lification			

Is the applicant the sole owner of the land on which the Groundwater registration modification or portion thereof, is located? Xes No If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the Groundwater registration has been conveyed.

14101 ==

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 Hudson Bay District Improvement Company	ADDRESS 512 N Main Street	
CITY	STATE	ZIP
Milton-Freewater	OR	97862

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	ADDRESS	
N/A		
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	ADDRESS				
Umatilla County Planning Department	216 SE 4 th Street				
CITY	STATE	ZIP			
Pendleton	OR	97801			

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.

Groundwater Registration # GR-1598 (Certificate # GR-1550

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)	T	wp	R	ng	Sec	7/4	1/4	Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
1	Authorized Proposed	UMAT 4987 UMAT 4996 UMAT 4923	6	N	35	E	34	NE	sw	500	487 feet West and 992 feet South from the Center of Section 34
2	Authorized Proposed		6	N	35	E	34	NE	sw	500	487 feet West and 1093 feet South from the Center of Section 34

Check all type(s) of modifications(s) proposed below (modification "CODES" are provided in parentheses):						
Pla	ce of Use (POU)	\boxtimes	Point of Appropriation (well) (POA)			
Character of Use (USE)			Additional Point of Appropriation (APOA)			
Will all of th	e proposed changes affect the entire	Groui	ndwater 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 po	ortion 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-1598 (Certificate # GR-1550)

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.

				t app	ears	in the	regist	ration E) POSED CHAN hat will be cha		Proposed Changes (see			Tł	ne li	sting			ld appe		TER PI	ı" lands) ROPOSED C	HANGES	
Twp	Rr	ng	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POA(s) (name or number from Table 1)	Priority	"CODES" from previous page)	Tv	vp	Rn	g	Sec	1/4	1/4	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POA(s) to be used (from Table 1)	Priority Date
												EXAMPLE													
6 N	35	E	34	SE	sw	500		1.0	IR	POA 1	1915	POA	6	N	35	E	34	SE	sw	500		1.0	IR	POA 2	1915
					TO	TAL AC	RES	1.0		-					L				TC	OTAL AC	CRES	1.0			

Additional remarks: Point of appropriation change only. GPS conversion to metes and bounds descriptions indicates new well would be 100 feet from old well. New well will be closer to 10-15 feet from old well. RECEIVED

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Groundwater Registration Modification - Page 6 of 7

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Groundwater Registration # GR-1598 (Certificate # GR-1550)

For a modification in place of use or character of use:

Are there other water right certificates, water use permits, o	r 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: **C.87556, C.92923**



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:

\boxtimes	Well log(s) are attached for each well that are clearly labeled and associated corresponding well(s) in Table 1 above and on the accompanying application	with the EIVED
	(Tip : You may search for well logs on the Department's web page at:	"SEP 2 2 2022
	http://apps.wrd.state.or.us/apps/gw/well_log/)	OWRD

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 complete d well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well - specific rate (cfs or gpm). If less than full rate of water right
POA 2	NO	N/A	~265' bgs	12"-8"	Not known	20+'	Not known	Not known	gravels	Not known

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Attachment #1

Application Map

POA Groundwater Registration Modification for GR-1598

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Attachment #2

Supplemental Form D

POA Groundwater Registration Modification for GR-1598

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Supplemental Form D

Water Right Transfers Within the Boundaries of or Served by an Irrigation District or other Water Supplier (Association, Ditch Co., etc.)

OREGON
WATER RESOURCES
DE PARTMENT

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

[For transfers submitted under OAR Chapter 690 Division 380]

The Department requires non-district applicants to communicate with districts/water suppliers during the planning and preparation of transfer applications involving water rights having a point of diversion or appropriation (POD/POA) or place of use (POU) served by or located within the boundaries of an irrigation district, or other type of water supplier to which assessments are paid. In some cases consent will be required from the district or water supplier.

This form must be included with any transfer application that involves rights served by or located within the boundaries of a district or other type of water supplier.

1. APPLICANT INFORMATION

NAME	PHONE (HM)			
ANDREWS HOLDINGS LLC, ROB ANDREWS, PRINCIP				
PHONE (WK)	CELL			FAX
(206) 343-9204		9-1-1		
ADDRESS			1777 380 177	
224 WESTLAKE AVENUE N, SUITE 500	1			
CITY	STATE	ZIP	E-MAIL**	
SEATTLE	WA	98109	ROB@NWRETAIL.COM	

2. DISTRICT or WATER SUPPLIER INFORMATION

DISTRICT/WATER SUPPLIER NAME HUDSON BAY DISTRICT IMPROVEMENT COMPANY	PHONE (HM)							
PHONE (WK) 509-520-2865	CEL	L		FAX				
ADDRESS 512 N. MAIN STREET								
CITY MILTON-FREEWATER	STATE OR	ZIP 97862	E-MAIL**					

^{**} By providing an e-mail address, the applicant and/or the district/water supplier consents to receive all correspondence from the Department electronically. Copies of final order documents will also be mailed.

3. WATER RIGHTS ISSUED IN THE NAME OF, or LOCATED WITHIN, or SERVED BY AN IRRIGATION DISTRICT, OTHER DISTRICT, OR WATER SUPPLIER

a. List the water right(s) involved in this transfer:

	Application / Decree	Permit / Previous Transfer	Certificate	Is the water right in the name of a district, water supplier, or BOR*?
1.	S-57959	S-43973	87556	YES 🖂
2.	S-2160	S-1216	92923	YES 🖂
3.		-		YES

Attach additional pages for additional water rights if necessary.

*Bureau of Reclamation

				olier's connection to your poin You may need to consult with y		•			
	CURREN	T ASSOCIA	TIONS Please an	nswer the following "yes" or "i	no" ques	stions:			
	YES 🗌	NO 🛚		he current POD(s) / POA(s) in pplier or rely on BOR water.	volved ii	the transfo	er are served by a		
	YES NO NO All or a portion of the current POU involved in this proposed transfer receives water for either primary or supplemental irrigation from the district/water supplier; i.e., the POU is currently layered with a district or BOR water supplied water right(s).								
	PROPOS	ED ASSOC	IATIONS Please a	inswer the following "yes" or	"no" que	estions:			
	YES 🗌	NO 🛚		he proposed POD(s) / POA(s) served by a district/water super.			•		
	YES 🔀	NO 🗌	receives or will re district/water su	f the proposed POU involved eceive either primary or supp pplier; i.e., the POU will be lay lied water right(s).	lementa	I irrigation that is the district,	from the		
(COMMENTS	OR ADDIT	IONAL INFORMAT	TON		SEF	2 2 2022		
4	applica ema (2) I certify	that I have tion by [chail,] pho	ve notified the dist neck one]: one,	rict/water supplier about the I, in person, or other (properties of the information contains)	please s	pecify)			
1	Applicant Sig			ROBERT M. ANOR		8 3 Date	1/22		
	Daniel se restaurant de la literatura de la			ER SUPPLIER CONSENT TO TH					
				ent is required if any box on t	nis torm	i is marked	YES."		
	The district/	water supp	plier certifies the f	ollowing:					
	(1) The dis maps; a		r supplier has revi	ewed the applicant's propose	d water	right transf	er application and		
	(2) The dis	trict/wate	r supplier consent	s to the proposed water right	transfe	application	ı. ·		
	YES	NO 🗌	•	completion, the confirming was.S. Bureau of Reclamation or t	_				
	YES [NO 🗌		iter supplier will be responsib by a Certified Water Rights Ex		-			
	Signature of	District Man	Denomination Denomi	Tim m DeRu Name (print), Title	ص لعن .	30 acq	2023		
9	Supplemental (Form D for D	ivision 380 Transfers	Within a District/Water Supplier	Page	2 of 2	Last Revised 11-2019		

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	es" or "no" questions:		ATIONS ROOSE C	DOSSA GE	
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SEP 2 2 2022			IONAL INFORMAT	OF ADDIT	
		riot/water suppliër abo	e notified the dist eck ane]:		
		viedge the information			
ATER RIGHT TRANSFER	TO THE PROPOSED W	ER SUPPLIER COMSEINT	DISTRICT OF WATE	(GEWING)	S. (WEEN BI
red "YES."	ox on this form is mark	d yns ti bedupen if any b	ater Stipplier cons		
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ansfer application and	roposed water right tr	ewed the applicant's p			
· noite	r right transfor applica	s to the proposed wate	supplier concent	trict/water	
cate is to remain in the ar supplier. N/A		completion, the confirm S. Bureau of Reclamati			□ zay
g the claim of beneficia N/A		iter supplier will be resilve a Certified Water Rig			
2000 000	of core to		28 Steet ager /Water Substite		
incom haring for	Tin Careti dada				lanamatoni2

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Attachment #4

Well Logs

POA Groundwater Registration Modification for GR-1598

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GRURD

90 - 1-serady act it decimation MacRess on rec GR-13

STATE	ENGINEER
Saler	n, Oregon

Irrigation of 11 acres.



Well Record

GR- 1549

STATE WELL NO. 6N/35=34L... COUNTY Umatilla APPLICATION NO. GR-1597....

OWNER: Donald J. IaMotte	MAILING ADDRESS:	Вох 6	
	CITY AND		
LOCATION OF WELL: Owner's No.		Milton-Freewater, Orego	n
NE ¼ SW ¼ Sec. 34 T. 6 SX R. 35	E. W. M.		
Bearing and distance from section or subdivision			
corner 470.5' W. & 1610' N. from St cor	. Sec. 34		
		112	
		Dien Weit	
Altitude at well 8751			
TYPE OF WELL: Dug Date Constructed	Prior to 1922		
Depth drilled48! Depth cased15!		Section34	
CASING RECORD: 72" x 72" concrete curbing from 0 tol5	ft.		
FINISH:			
AQUIFERS:	,		
WATER LEVEL:			· .
40° in May 1958			
PUMPING EQUIPMENT: Type3" CentCapacity350 G.P.M.		H.P.	10
WELL TESTS: Drawdown 4 - 6 ft. after	hours	250	G.P.M.
Drawdown ft. after		_	
USE OF WATER Irrigation SOURCE OF INFORMATION GR record	Temp	°F	, 19
DRILLER or DIGGER ADDITIONAL DATA: Log			
REMARKS:			
	to 3 ft.	RECEIVED	

14TPP

SEP 2 2 2022

		· · · · · · · · · · · ·	1.5		
STATE ENGINEER	(UMAT)	Well Record	STATE W	ELL NO6N/	35-34P
Salem, Oregon	(uga(n)	_GR- 1550		Umatilla TION NOGR	
70.00		MAILING			
OWNER: Donald J.	LaMotte	ADDRESS:	Box 6	***************************************	***************************************
LOCATION OF WELL	: Owner's No.	CITY AND STATE:	Milton-Free	water, Oregon	1
SE 1/4 SW 1/4 Sec	34 T. 6 XS., R.	35 W , W.M.			
Bearing and distance from	om section or subdivis	sion			
corner 470.5' W. &	1010' N. from St	cor. Sec. 34			

***************************************		**************			
***************************************		************			
Altitude at well 875	;1	****************	E. Car	NELL	
TYPE OF WELL: Du	g Date Construc	ted 1916 -Prior to	12		
Depth drilled 481			Section	34	
CASING RECORD:				0.0	
61 x 61 concrete	curbing from 0 to	15 ft.	same us	well	
			Jame	umot.	0.02
			· W	H	487
FINISH:					
AQUIFERS:		The second secon		manufacture has a committee of the second committee of	
WATER LEVEL:			100		
401					
PUMPING EQUIPMEN Capacity 50 to 70				Н.Р.	1
WELL TESTS:	G.F.IVI.	Annual Administration () and			
	- 4 ft. after	hours	50	***************************************	G.P.M.
Drawdown	ft. after	hours		***************************************	G.P.M.
USE OF WATERI	rmi cation	Temp	੦ਜ਼ਾ		10
SOURCE OF INFORM					
DRILLER or DIGGER ADDITIONAL DATA:) }			******************	
	Level Measurements	Chemical An	alysis	Aquifer Test	
REMARKS:					
	am 0 to 3 ft. vel 3 to 48 f				
Irrigation of 1.0	acres.		R	ECEIVED	
			14101	ED 2 9 2022	
			1/101	EL & & COLE	
		State Printing 89316	TATAT	MAIDD	

STATE OF OREGON 1

WATER WELL REPORT (as required by ORS 537.765)

UMAT 4923

JUN 0 9 1988

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bal 35 E-36

Solution of Montal Program Computed Well Cable Computed Well Computed Well Computed Well Cable	(1) OWNER: Well Number: WATER RE	(9) LOCATION OF WELL by legal description:
Community Depth Artesian Depth Art	SALE	1 O County Count
Tall to GOS COLOR Soldwindon Cable Cable Combined Cable Color Community	Address KT 2 30 X 5 Y	Township None, Range 55 Ec. W. WM.
New Wall Design Recondition Ahamoton		
Combined Cable Combined Cable Combined Cable Completed Completed Completed Cable Completed Cable Cab	(2) TYPE OF WORK:	6' 4 - 4
Cother College Community College Community College Community College Community College	New Well Deepen Recondition Abandon	Street Address of Well (or nearest address)
Cother College Community College Community College Community College Community College	(3) DRILL METHOD	
Artesian prossors In. per square fond. Date Industrial Birrigation Industrial Birrigation Other		(10) STATIC WATER LEVEL:
Afterlain pressure	Other	46 ft. below land surface. Date 5-5-88
Date Description Description Description Description Description Description Description Description Description Description of Research Description o	(4) PROPOSED USE:	
BORE HOLE CONSTRUCTION: Special Construction approved Yes Note to Material Property Services and		
BORE HOLE CONSTRUCTION: Special Construction approved Yes No Depth of Completed Well 6. Explosives used		(11) WAIER BEARING ZONES.
Special Construction approved Ye		Depth at which water was first found
Explosives used Type SEAL Amount Hou.E geter From To Material From To Section pounds Material From To Section Material From To Section Material From To Section Material From To Section Sec		
HOLE SEAL Material From To Swall State From To Swall	Yes No	80 90 50Gpm
Section Property	Explosives used	145 152 40 BKDM
Carter S S S S S S S S S		245 255 GO GODAN 46
Casing C	neter From To Material From To sacks r pounds	
How was seal placed: Method	Bustanits 9 15 8	(12) WELL LOG: Ground elevation
How was seal placed: Method	8 18 265	Meterial From To SWL
Casing Secret Size Secret Size Secret Size Secret Size Secret		
Casing Steel Plastic Welded Threaded	How was seal placed: Method	
Backfill placed from		July of Mary
Casing		
Diameter From To Gauge Steel Plastic Welded Threaded Casing	-	
Diameter From To Gauge Steel Plastic Welded Threaded Casing	(6) CASING/LINER:	
Coation of shoe(s) Complete	Diameter From To Gauge Steel Plastic Welded Threaded	pattom 1887
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To Size Number Diameter Size Casing Liner		
Completed Comp		OM/DD
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Date started 3 - 3 - Completed 5 - 5 - 8 Completed 5 - 5 - 5 Completed 5 - 5 C		
Date started Signed Date Started Signed Date Started Signed Date Started Signed Date Started Signed Date Started Signed Date Started Signed Date Started Signed Date Started Signed Date Started Signed Date Started Signed Date Signed Salty Muddy Odor Colored Other Depth of strata: Signed Date Signed Date Signed Date Signed Date Signed Date Signed Si		
(8) WELL TESTS: Minimum testing time is 1 hour Pump		
(8) WELL TESTS: Minimum testing time is 1 hour Pump		Date started 5-3-88 Completed 5-5-88
Second Colored Colored Other Colored		(unbonded) Water Well Constructor Certification:
Pump		I certify that the work I performed on the construction, alteration, or
Yield gal/min Drawdown Drill stem at Time 1	Pump Bailer Air Artesian	
Signed S	•	
Signed S		
Temperature of water 58 Depth Artesian Flow Found Was a water analysis done? Yes By whom 70 Did any strata contain water not suitable for intended use? Too little Work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief. Depth of strata: Signed Signed Date 5-2.5	130 3/8 200 Inc.	Signed Date
Temperature of water 58 Depth Artesian Flow Found Was a water analysis done? Yes By whom 70 Did any strata contain water not suitable for intended use? Too little Work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and belief. Depth of strata: Signed Signed Date 5-2.5		(honded) Water Well Constructor Certification:
Was a water analysis done?	500	
Did any strata contain water not suitable for intended use? Too little Construction standards. This report is true to the best of my knowledge and belief. WWC Number 5-75 Depth of strata: Signed Date 5-2.5-87		work performed on this well during the construction dates reported above. all
□ Salty □ Muddy □ Odor □ Colored □ Other □ Belief. WWC Number 5-75 Depth of strata: □ Signed Classes □ Date 5-2.5-89		work performed during this time is in compliance with Oregon well construction standards. This report is true to the best of my knowledge and
Depth of strata: Date 5-2.5-87		belief. / WWC Number 6-75
WHITE COPIES - WATER RESOURCES DEPARTMENT YELLOW COPY - CONSTRUCTOR PINICOPY CUSTOMER 9809C 10/86		Signed Pall net Symmes Date 5-25-80
		OPY - CONSTRUCTOR PINICOPY CUSTOMER 9809C 10/86

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"START CARD"

NOTICE OF BEGINNING OF WELL CONSTRUCTION (as required by ORS 537.762)

This form must be completed, signed by both the owner (or authorized agent) and constructor, and the original delivered to the Water Resources Department prior to commencement of construction, alteration or abandonment of each well.

, ,,		
Owner's Name and	Bill WordRa.	
Mailing Address	R+#2 BOX 56	C
: (-	miltow Freewater, OR 97862	
Proposed Commence	ment Date	à, ·
Proposed Well Depth and Use:		
Domestic Thermal	☐ Community ☐ Industrial ☐ Irrigation ☐ Other	····
Proposed Well Location	on: County	
Township	(N o r S) Range 35 (E er W) Section 34	
	11/4 of1/4 of above section	-
At least 2 of these	2. street address ofwell location	
must be provided	3. tax lot number of well location	C
	4. attach approved map with location identified.	
	(see reverse of this form for approved maps)	1.
21.		•
We hereby certify that provided herein is according to the control of the control	t we have read the back of this form, and that to the best of our knowledge the information curate and the well is being properly located from septic tanks and septic drain fields.	
xWilli Jon	wher's Signature X A Security Sussemment Signature Bonded Water Well Constructor	
Gur	License No. 575	
M. 2 K	288 Duis Commence Das	11

Note: This is not a Water Right application. The owner is responsible for obtaining a Water Right through the Water Resources Department if required.

Form 537.762 1987

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