

Application for Permanent Water Right Transfer



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

Part 1 of 5 – Minimum Requirements Checklist

This transfer application will be returned if Parts 1 through 5 and all required attachments are not completed and included.
For questions, please call (503) 986-0900, and ask for Transfer Section.

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

- Part 1 – Completed Minimum Requirements Checklist.
- Part 2 – Completed Transfer Application Map Checklist.
- Part 3 – Application Fee, payable by check to the Oregon Water Resources Department, and completed Fee Worksheet, page 3. Try the new online fee calculator at: http://apps.wrd.state.or.us/apps/misc/wrd_fee_calculator.
- Part 4 – Completed Applicant Information and Signature.
- Part 5 – Information about Water Rights to be Transferred: **How many water rights are to be transferred? 1 List them here: Certificate: 96789**
Please include a separate Part 5 for each water right. (See instructions on page 6)
NOTE: A separate transfer application is required for each water right unless the criteria in OAR 690-380-3220 are met.

Attachments:

- Completed Transfer Application Map.
- Completed Evidence of Use Affidavit and supporting documentation.
- N/A Affidavit(s) of Consent from Landowner(s) (if the applicant does not own the land the water right is on.)
- N/A Supplemental Form D – For water rights served by or issued in the name of an irrigation district. Complete when the transfer applicant is not the irrigation district.
- N/A Oregon Water Resources Department’s Land Use Information Form with approval and signature (or signed land use form receipt stub) from each local land use authority in which water is to be diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, and/or used only on federal lands or if **all** of the following apply: a) a change in place of use only, b) no structural changes, c) the use of water is for irrigation only, and d) the use is located within an irrigation district or an exclusive farm use zone.
- N/A Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or additional point(s) of appropriation.
- N/A Geologist Report for a change from a surface water point of diversion to a ground water point of appropriation (well), if the proposed well is more than 500’ from the surface water source and more than 1000’ upstream or downstream from the point of diversion. See OAR 690-380-2130 for requirements and applicability.

(For Staff Use Only)

WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):

<input type="checkbox"/> Application fee not enclosed/insufficient	<input type="checkbox"/> Map not included or incomplete
<input type="checkbox"/> Land Use Form not enclosed or incomplete	<input type="checkbox"/> Evidence of Use Form not enclosed or incomplete
<input type="checkbox"/> Additional signature(s) required	<input type="checkbox"/> Part _____ is incomplete

Other/Explanation _____

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

Part 2 of 5 – Transfer Application Map

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

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

- N/A Certified Water Right Examiner (CWRE) Stamp and Original Signature. For a list of CWREs, see http://apps.wrd.state.or.us/apps/wr/cwre_license_view/. CWRE stamp and signature are not required for substitutions.
- N/A If **more than three** water rights are involved, separate maps are needed for each water right.
- Permanent quality printed with dark ink on good quality paper.
- The size of the map can be 8½ x 11 inches, 8½ x 14 inches, 11 x 17 inches, or up to 30 x 30 inches. For 30 x 30 inch maps, one extra copy is required.
- A north arrow, a legend, and scale.
- The scale of the map must be: 1 inch = 400 feet, 1 inch = 1,320 feet, the scale of the Final Proof/Claim of Beneficial Use Map (the map used when the permit was certificated), the scale of the county assessor map if the scale is not smaller than 1 inch = 1,320 feet, or a scale that has been pre-approved by the Department.
- Township, Range, Section, ¼ ¼, DLC, Government Lot, and other recognized public land survey lines.
- Tax lot boundaries (property lines) are required. Tax lot numbers are recommended.
- Major physical features including rivers and creeks showing direction of flow, lakes and reservoirs, roads, and railroads.
- Major water delivery system features from the point(s) of diversion/appropriation such as main pipelines, canals, and ditches.
- Existing place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions. If less than the entirety of the water right is being changed, a separate hachuring is needed for lands left unchanged.
- N/A Proposed place of use that includes separate hachuring for each water right, priority date, and use including number of acres in each quarter-quarter section, government lot, or in each quarter-quarter section as projected within government lots, donation land claims, or other recognized public land survey subdivisions.
- Existing point(s) of diversion or well(s) with distance and bearing or coordinates from a recognized survey corner. This information can be found in your water right certificate or permit.
- N/A If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinates are used, latitude-longitude coordinates may be expressed as either degrees-minutes-seconds with at least one digit after the decimal (example – 42°32'15.5") or degrees-decimal with five or more digits after the decimal (example – 42.53764°).

MAR 17 2023

FEE WORKSHEET for PERMANENT TRANSFER (except Substitution)			
1	Base Fee (includes one type of change to one water right for up to 1 cfs)	1	\$1,360
Types of change proposed: <input type="checkbox"/> Place of Use <input type="checkbox"/> Character of Use <input checked="checked" type="checkbox"/> Point of Diversion/Appropriation Number of above boxes checked = <u>1</u> (2a) Subtract 1 from the number in line 2a = <u>0</u> (2b) <i>If only one change, this will be 0</i>			
2	Multiply line 2b by \$1090 and enter »	2	\$0
Number of water rights included in transfer <u>1</u> (3a) Subtract 1 from the number in 3a above: <u>0</u> (3b) <i>If only one water right this will be 0</i>			
3	Multiply line 3b by \$610 and enter »	3	\$0
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="checked" type="checkbox"/> Yes: enter \$480 for the 1 st well to be added or changed \$480 (4a) Do you propose to add or change additional wells? <input type="checkbox"/> No: enter 0 <input checked="checked" type="checkbox"/> Yes: multiply the number of additional wells by \$410 \$410 (4b)			
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » » »	4	\$890
Do you propose to change the place of use or character of use? <input checked="checked" type="checkbox"/> No: enter 0 on line 5 <input type="checkbox"/> Yes: enter the cfs for the portions of the rights to be transferred (see below*): _____ (5a) Subtract 1.0 from the number in 5a above: _____ (5b) If 5b is 0 or less, enter 0 on line 5 » If 5b is greater than 0, round up to the nearest whole number: _____ (5c) and multiply 5c by \$410, then enter on line 5 »			
5		5	\$0
6	Add entries on lines 1 through 5 above » » » » » » » » » » Subtotal:	6	\$2,250
Is this transfer: <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 »			
7	If no box is applicable, enter 0 on line 7 »	7	\$0
8	Subtract line 7 from line 6 » Transfer Fee:	8	\$2,250

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

- For irrigation calculate cfs for each water right involved as follows:
 - Divide total authorized cfs by total acres in the water right (*for C12345, 1.25 cfs ÷ 100 ac*); then multiply by the number of acres to be transferred to get the transfer cfs (*x 45 ac = 0.56 cfs*).
 - If the water right certificate 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 C87654, 45.0 ac x 0.0125 cfs/ac = 0.56 cfs*)
- Add cfs for the portions of water rights on all the land included in the transfer; however **do not count cfs for supplemental rights on acreage for which you have already calculated the cfs fee for the primary right on the same land**. The fee should be assessed only once for each "on the ground" acre included in the transfer. (*In this example, blank 5a would be only 0.56 cfs, since both rights serve the same 45.0 acres. Blank 5b would be 0 and Line 5 would then also become 0*).

FEE WORKSHEET for SUBSTITUTION			
1	Base Fee (includes change to one well)	1	\$990.00
Number of wells included in substitution _____ (2a) Subtract 1 from the number in 2a above: _____ (2b) <i>If only one well this will be 0</i>			
2	Multiply line 2b by \$480 and enter »	2	NA
3	Add entries on lines 1 through 2 above » » » » » » Fee for Substitution:	3	NA

18487 S. Valley Vista Rd.
Mulino, Oregon 97042
(503) 632-5016 Phone
(503) 632-5983 Fax

Pacific Hydro-Geology Inc.

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December 19, 2023

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Memo

To: Oregon Water Resources Department / Kim French
From: Doann Hamilton, CWRE
CC:
Date: November 6, 2023
Re: Certificate 96789 transfer T-14189 revisions

While our client Ernst Nursery was developing the water right under the newly issued final order for T-14049, they realized Well 4 (MARI 1132) was not going to produce the volume noted on the existing well log. They have decided not to use this existing well in this transfer but instead propose a new Well 5 to be drilled about 50 feet to the west of the existing well.

Our client understands the groundwater review has already been process, and an additional fee might be attached to make this change. Please let us know what this additional fee will be.

Attached are the corrected map and pages to reflect this change.



Part 4 of 5 – Applicant Information and Signature

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Applicant Information

APPLICANT/BUSINESS NAME Bruce Ernst		PHONE NO. (503) 633-8366	ADDITIONAL CONTACT NO.
ADDRESS PO Box 460			FAX NO.
CITY Saint Paul	STATE OR	ZIP 97137	E-MAIL acc@ernstnursery.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.

AGENT/BUSINESS NAME Doann Hamilton / Pacific Hydro-Geology, Inc.		PHONE NO. (503) 632-5016	ADDITIONAL CONTACT NO. (503) 349-6946 (cell)
ADDRESS 18487 S. Valley Vista Road			FAX NO. (503) 632-5983
CITY Mulino	STATE OR	ZIP 97042	E-MAIL 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 transfer application, and why:
We need the additional wells to assist Well 2 (MARI 51725) to supply water to the full rate and cover the full place of us by tying in these additional wells to our existing mainline system.

Well 4 (MARI 1132) has been determine to not produce the volume stated in the well log and will not be used. We propose a replacement Well 5 to be drilled 50 feet west of the original Well 4 (MARI 1132)

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

Revised
 11-6-23
 DH

Check One Box

- By signing this application, I understand that, upon receipt of the draft preliminary determination and prior to Department approval of the transfer, I will be required to provide landownership information and evidence that I am authorized to pursue the transfer as identified in OAR 690-380-4010(5); **OR**
- I affirm the applicant is a municipality as defined in ORS 540.510(3)(b) and that the right is in the name of the municipality or a predecessor; **OR**
- I affirm the applicant is an entity with the authority to condemn property and is acquiring by condemnation the property to which the water right proposed for transfer is appurtenant and have supporting documentation.

By my signature below, I confirm that I understand:

- Prior to Department approval of the transfer application, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the water right is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Woodburn Independent.
- Amendments to the application may only be made in response to the Department's Draft Preliminary Determination (DPD). The applicant will have a period of at least 30 days to amend the application to address any issues identified by the Department in the DPD, or to withdraw the application. Note that amendments may be subject to additional fees, pursuant to ORS 536.050.
- Failure to complete an approved change in place of use and/or change in character of use, will result in loss of the water right (OAR 690-380-6010).
- Refunds may only be granted upon request and, as set forth in ORS 536.050(4)(a), if the Director determines that a refund of all or part of a fee is appropriate in the interests of fairness to the public or necessary to correct an error of the Department.

Is the applicant the sole owner of the land on which the water right, or portion thereof, proposed for transfer is located? Yes No*

*If NO, include signatures of all deeded landowners (and mailing and/or e-mail addresses if different than the applicant's) or attach affidavits of consent (and mailing and/or e-mail addresses) from all landowners or individuals/entities to which the water right(s) were conveyed.

Check the following boxes that apply:

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

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

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

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

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

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

IRRIGATION DISTRICT NAME NA	ADDRESS	
CITY	STATE	ZIP

Check here if water for any of the rights supplied under a water service agreement or other contract for stored water with a federal agency or other entity.

ENTITY NAME NA	ADDRESS	
CITY	STATE	ZIP

To meet State Land Use Consistency Requirements, you must list all county, city, municipal corporation, or tribal governments within whose jurisdiction water will be diverted, conveyed or used.

ENTITY NAME Marion County Planning Division	ADDRESS 5155 Silverton Road NE	
CITY Salem	STATE Oregon	ENTITY NAME Marion County Planning Division

Part 5 of 5 – Water Right Information

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

CERTIFICATE # 96789

Description of Water Delivery System

System capacity: 1.78 cubic feet per second (cfs) OR
 _____ gallons per minute (gpm)

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Describe the current water delivery system or the system that was in place at some time within the last five years. Include information on the pumps, canals, pipelines, and sprinklers used to divert, convey, and apply the water at the authorized place of use. **Water is pumped from Well 1 using a 10 Hp submersible pump to convey water through a 4-inch buried PVC pipe to the west to irrigate a 7.6--acre section with impact sprinklers. Water is pumped from Well 2 using a 75 Hp submersible pump to convey water through an 8-inch buried PVC pipe heading east and west to connect to additional 6-inch buried PVC mainline with hydrants where 3-inch portable handlines with impact sprinklers can be attached.**

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

POD/POA Name or Number	Is this POD/POA Authorized on the Certificate or is it Proposed?	If POA, OWRD Well Log ID# (or Well ID Tag # L-___)	Twp		Rng		Sec	¼ ¼		Tax Lot, DLC or Gov't Lot	Measured Distances (from a recognized survey corner)
Well 1	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 1065	4	S	2	W	4	SW	SE	DLC 70	720 feet south and 1,000 feet east from the NW corner, DLC 70
Well 2	<input checked="" type="checkbox"/> Authorized <input type="checkbox"/> Proposed	MARI 51725	4	S	2	W	4	SW	SE	DLC 70	635 feet south and 1,000 feet east from the NW corner, DLC 70.
Well 3	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	MARI 68592	4	S	2	W	4	SW	SE	DLC 70	1,200 feet south and 1,905 feet east from the NW corner, DLC 70.
Well 5	<input type="checkbox"/> Authorized <input checked="" type="checkbox"/> Proposed	NA	4	S	2	W	9	NE	NE	DLC 70	2,330 feet south and 1,140 feet east from the NE corner, DLC 70.

*Revised
11-6-23
DJA*

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

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

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

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

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

Table 2. Description of Changes to Water Right Certificate # 967989

List the change proposed for the acreage in each ¼ ¼. If more than one change is proposed, specify the acreage associated with each change.
If there is more than one POD/POA involved in the proposed changes, specify the acreage associated with each POD/POA.

AUTHORIZED (the "from" or "off" lands) The listing that appears on the certificate BEFORE PROPOSED CHANGES List only that part or portion of the water right that will be changed.											Proposed Changes (see "CODES" from previous page)	PROPOSED (the "to" or "on" lands) The listing as it would appear AFTER PROPOSED CHANGES are made.											
Twp	Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	Type of USE listed on Certificate	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Twp		Rng	Sec	¼ ¼	Tax Lot	Gvt Lot or DLC	Acres	New Type of USE	POD(s)/POA(s) to be used (from Table 1)	Priority Date			
										APOA	4	S	2	W	4	NE	SW	1300	Lot 4	1.5	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	4	NE	SW	1100	DLC 70	3.6	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	4	SE	SW	1100	DLC 70	10.9	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	4	SE	SW	1100	DLC 70	4.6	Nursery	Well 1	5-4-2004
										APOA	4	S	2	W	4	NE	SE	1300	Lot 6	5.0	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	4	NE	SE	1100	DLC 70	2.0	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	4	NW	SE	1300	Lot 5	18.7	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	4	NW	SE	1100	DLC 70	7.4	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	4	SW	SE	1100	DLC 70	28.8	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	4	SW	SE	1100	DLC 70	3.0	Nursery	Well 1	5-4-2004
										APOA	4	S	2	W	4	SE	SE	1100	DLC 70	6.1	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	9	NE	NE	1100	DLC 70	1.1	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	9	NW	NE	1100	DLC 70	4.0	Nursery	Wells 2, 3, 5	5-4-2004
										APOA	4	S	2	W	9	NE	NW	1100	DLC 70	1.2	Nursery	Wells 2, 3, 5	5-4-2004
TOTAL ACRES:												TOTAL ACRES:						97.9					

*Revised 1/6-23
DH*

Additional remarks: The well specifications given below for the additional well are estimates only. The actual well construction will be based on conditions encountered in the field. The objective will be to construct a well which develops water from the alluvial aquifer.

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For Place of Use or Character of Use Changes - NA

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

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

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

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

Ground water supplemental Permit or Certificate # NA;

Surface water primary Certificate # NA.

For a change from Supplemental Irrigation Use to Primary Irrigation Use

Identify the primary certificate to be cancelled. Certificate # NA

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

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map.

Tip: You may search for well logs on the Department's web page at:

http://apps.wrd.state.or.us/apps/gw/well_log/Default.aspx

AND/OR

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

Table 3. Construction of Point(s) of Appropriation

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

Proposed or Authorized POA Name or Number	Is well already built? (Yes or No)	If an existing well: OWRD Well ID Tag No. L-_____	Total well depth	Casing Diameter	Casing Intervals (feet)	Seal depth(s) (intervals)	Perforated or screened intervals (in feet)	Static water level of completed well (in feet)	Source aquifer (sand, gravel, basalt, etc.)	Well-specific rate (cfs or gpm). If less than full rate of water right
Well 1	Yes	MARI 1065	See Well Log MARI 1065							Not less than full rate of water right
Well 2	Yes	MARI 51725	See Well Log MARI 51725							
Well 3	Yes	MARI 68592	See Well Log MARI 68592							
Well 5	No	NA	125 feet	10 inch	0 to 125	0 to 35	TBD	NA	Alluvial	

Revised 11-6-23 AH

Application for Water Right Transfer

Evidence of Use Affidavit



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

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

State of Oregon)
) ss
 County of MARION)

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 MAR 17 2023
 OWRD

I, BRUCE ERNST, in my capacity as OWNER/OPERATOR,
 mailing address PO BOX 460, SAINT PAUL, OR, 97137
 telephone number (503) 633-1366, being first duly sworn depose and say:

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

- Personal observation Professional expertise

2. I attest that:

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

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

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

OR

- Confirming Certificate # 96789 has been issued within the past five years; **OR**
- Part or all of the water right was leased instream at some time within the last five years. The instream lease number is: _____ (Note: If the entire right proposed for transfer was not leased, additional evidence of use is needed for the portion not leased instream.); **OR**
- The water right is not subject to forfeiture and documentation that a presumption of forfeiture for non-use would be rebutted under ORS 540.610(2) is attached.
- Water has been used at the actual current point of diversion or appropriation for more than 10 years for Certificate # _____ (For Historic POD/POA Transfers)

(continues on reverse side)

3. The water right was used for: (e.g., crops, pasture, etc.): NURSERY STOCK
4. I understand that if I do not attach one or more of the documents shown in the table below to support the above statements, my application will be considered incomplete.

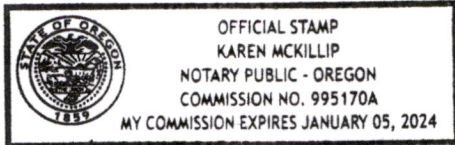
Bruce W Ernst

Signature of Affiant

2-10-23

Date

Signed and sworn to (or affirmed) before me this 10 day of February, 2023.



Karen McKillip

Notary Public for Oregon

My Commission Expires: January 5, 2024

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

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STATE OF OREGON
COUNTY OF MARION
CERTIFICATE OF WATER RIGHT

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THIS CERTIFICATE ISSUED TO

BRUCE ERNST
PO BOX 460
SAINT PAUL OR 97137

confirms the right to the use of water perfected under the terms of Permit G-18143. The amount of water used to which this right is entitled is limited to the amount used beneficially, and shall not exceed the amount specified, or its equivalent in the case of rotation, measured at the point of diversion from the source. The specific limits and conditions of the use are listed below.

APPLICATION FILE NUMBER: G-16246

SOURCE OF WATER: WELL 1 AND WELL 2 IN MISSION CREEK BASIN

PURPOSE OR USE: NURSERY USES ON 97.9 ACRES

MAXIMUM RATE: 1.78 CUBIC FEET PER SECOND (CFS), FURTHER LIMITED OF 0.31 CFS FOR NURSERY USES ON 7.6 ACRES FROM WELL 1 AND 1.50 CFS FOR NURSERY USES ON 90.3 ACRES FROM WELL 2, NOT TO EXCEED CUMULATIVE TOTAL OF 1.78 CFS AT ANY TIME

PERIOD OF USE: YEAR ROUND

DATE OF PRIORITY: MAY 12, 2004

WELL LOCATIONS:

Twp	Rng	Mer	Sec	Q-Q	DLC	Measured Distances
4 S	2 W	WM	4	SW SE	70	WELL 1 (NEW) - 720 FEET SOUTH AND 1000 FEET EAST FROM NW CORNER, DLC 70
4 S	2 W	WM	4	SW SE	70	WELL 2 (NEW) - 635 FEET SOUTH AND 1000 FEET EAST FROM NW CORNER, DLC 70

The amount of water used for nursery use is limited to a maximum of 5.0 acre feet per acre and a diversion of 0.15 cubic foot per second per acre. For irrigation of containerized nursery plants, the amount of water diverted is limited to one fortieth of one cubic foot per second and 5.0 acre feet per acre per year. For irrigation of in-ground nursery plants the amount of water diverted is limited to one eightieth of one cubic foot per second and 2.5 acre feet per acre per year. The use of water for nursery use may be made any time, during the period of allowed use specified above, that the use is beneficial. For irrigation of any other crop, the amount of water diverted is limited to one eightieth of one cubic foot per second and 2.5 acre feet per acre during the irrigation season of each year.

NOTICE OF RIGHT TO PETITION FOR RECONSIDERATION OR JUDICIAL REVIEW

This is an order in other than a contested case. This order is subject to judicial review under ORS 183.484 and ORS 536.075. Any petition for judicial review must be filed within the 60-day time period specified by ORS 183.484(2). Pursuant to ORS 183.484, ORS 536.075 and OAR 137-004-0080, you may petition for judicial review and petition the Director for reconsideration of this order. A petition for reconsideration may be granted or denied by the Director, and if no action is taken within 60 days following the date the petition was filed, the petition shall be deemed denied. In addition, under ORS 537.260 any person with an application, permit or water right certificate subsequent in priority may jointly or severally contest the issuance of the certificate within three months after issuance of the certificate.

THE PLACE OF USE IS LOCATED AS FOLLOWS:

NURSERY								
Twp	Rng	Mer	Sec	Q-Q	GLot	DLC	Acres	Well
4 S	2 W	WM	4	NE SW	4		1.5	Well 2
4 S	2 W	WM	4	NE SW		70	3.6	Well 2
4 S	2 W	WM	4	SE SW		70	10.9	Well 2
4 S	2 W	WM	4	SE SW		70	4.6	Well 1
4 S	2 W	WM	4	NE SE	6		5.0	Well 2
4 S	2 W	WM	4	NE SE		70	2.0	Well 2
4 S	2 W	WM	4	NW SE	5		18.7	Well 2
4 S	2 W	WM	4	NW SE		70	7.4	Well 2
4 S	2 W	WM	4	SW SE		70	28.8	Well 2
4 S	2 W	WM	4	SW SE		70	3.0	Well 1
4 S	2 W	WM	4	SE SE		70	6.1	Well 2
4 S	2 W	WM	9	NE NE		70	1.1	Well 2
4 S	2 W	WM	9	NW NE		70	4.0	Well 2
4 S	2 W	WM	9	NE NW		70	1.2	Well 2

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Measurement, recording and reporting conditions:

- A. The water user shall maintain the totalizing flow meter or other suitable measuring device as approved by the Director in good working order consistent with those standards identified in OAR 690-507-645 (1) through (30) at each point of appropriation (new and existing). The water user shall keep a complete record of the amount of water used each month and shall submit a report which includes the recorded water use measurements to the Department annually or more frequently as may be required by the Director. Further, the Director may require the water user to report general water use information, including the place and nature of use of water under the right.
- B. The water user shall allow the Watermaster access to the meters or measuring devices; provided however, where the meters or measuring devices are located within a private structure, the Watermaster shall request access upon reasonable notice.

The combined quantity of water diverted at the new points of appropriation shall not exceed the quantity of water lawfully available at the original points of appropriation described as follows:

Twp	Rng	Mer	Sec	Q-Q	DLC	Measured Distances
4 S	2 W	WM	4	SW SE	70	ORIGINAL WELL 1 - 610 FEET SOUTH AND 960 FEET EAST FROM NW CORNER, DLC 70
4 S	2 W	WM	4	SW SE	70	ORIGINAL WELL 2 - 660 FEET SOUTH AND 995 FEET EAST FROM NW CORNER, DLC 70

Water shall be acquired from the same aquifer as the original points of appropriation.

To monitor the effect of water use from the well(s) authorized under this right, the Director may require the water user to make and report annual static water level measurements. The static water level shall be measured in the month of March. Reports shall be submitted to the Department within 30 days of measurement. The measurements may be required in a different month. If the measurement requirement is stopped, the Director may restart it at any time.

All measurements shall be made by a certified water rights examiner, registered professional geologist, registered professional engineer, licensed well constructor or pump installer licensed by the Construction Contractors Board and be submitted to the Department on forms provided by the Department. The Department requires the individual performing the measurement to:

- (A) Identify each well with its associated measurement; and
- (B) Measure and report water levels to the nearest tenth of a foot as depth-to-water below ground surface; and
- (C) Specify the method used to obtain each well measurement; and
- (D) Certify the accuracy of all measurements and calculations submitted to the Department.

The water user shall discontinue use of, or reduce the rate or volume of withdrawal from, the well(s) if annual water level measurements reveal any of the following events:

- (A) An average water level decline of three or more feet per year for five consecutive years; or
- (B) A water level decline of 15 or more feet in fewer than five consecutive years; or
- (C) A water level decline of 25 or more feet; or
- (D) Hydraulic interference leading to a decline of 25 or more feet in any neighboring well with senior priority.

The reference levels against which any future measurements will be compared is 12.00 feet below land surface for Well 1 and 87.83 feet below land surface for Well 2.

The period of non or restricted use shall continue until the water level rises above the decline level which triggered the action or until the Department determines, based on the water user's and/or the Department's data and analysis, that no action is necessary because the aquifer in question can sustain the observed declines without adversely impacting the resource or senior water rights. The water user shall in no instance allow excessive decline, as defined in Commission rules, to occur within the aquifer as a result of use under this right. If more than one well is involved, the water user may submit an alternative measurement and reporting plan for review and approval by the Department.

If substantial interference with a senior water right occurs due to withdrawal of water from any well listed on this right, then use of water from the well(s) shall be discontinued or reduced and/or the schedule of withdrawal shall be regulated until or unless the Department approves or implements an alternative administrative action to mitigate the interference. The Department encourages junior and senior appropriators to jointly develop plans to mitigate interferences.

The wells shall be maintained in accordance with the General Standards for the Construction and Maintenance of Water Wells in Oregon. The works shall be equipped with a usable access port, and may also include an air line and pressure gauge adequate to determine the water level elevation in the well at all times.

Where two or more water users agree among themselves as to the manner of rotation in the use of water and such agreement is placed in writing and filed by such water users with the watermaster, and such rotation system does not infringe upon such prior rights of any water user not a party to such rotation plan, the watermaster shall distribute the water according to such agreement.

The Director may require water level or pump test results every ten years.

Failure to comply with any of the provisions of this right may result in action including, but not limited to, restrictions on the use, civil penalties, or cancellation of the right.

This right is for the beneficial use of water without waste. The water user is advised that new regulations may require the use of best practical technologies or conservation practices to achieve this end.

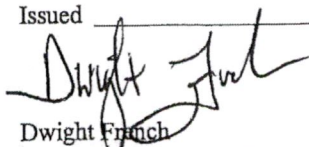
By law, the land use associated with this water use must be in compliance with statewide land-use goals and any local acknowledged land-use plan.

The use of water shall be limited when it interferes with any prior surface or ground water rights.

The right to the use of the water for the above purpose is restricted to beneficial use on the place of use described.

DEC 23 2022

Issued _____



Dwight French
Water Right Services Division Administrator, for
Douglas E. Woodcock, Acting Director
Oregon Water Resources Department

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Land Use Information Form

Applicant(s): Bruce Ernst

Mailing Address: PO Box 460

City: St. Paul

State: OR

Zip Code: 97137

Daytime Phone: (503) 633-8366

A. Land and Location

Please include the following information for all tax lots where water will be diverted (taken from its source), conveyed (transported), and/or used or developed. Applicants for municipal use, or irrigation uses within irrigation districts may substitute existing and proposed service-area boundaries for the tax-lot information requested below.

Township	Range	Section	¼ ¼	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)	Water to be:	Proposed Land Use:
<u>4S</u>	<u>2W</u>	<u>4</u>	_____	<u>1100</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>IR</u>
<u>4S</u>	<u>2W</u>	<u>4</u>	_____	<u>1300</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input checked="" type="checkbox"/> Used	<u>IR</u>
<u>4S</u>	<u>2W</u>	<u>4</u>	_____	<u>1700</u>	<u>EFU</u>	<input checked="" type="checkbox"/> Diverted <input checked="" type="checkbox"/> Conveyed <input type="checkbox"/> Used	<u>IR</u>
_____	_____	_____	_____	_____	_____	<input type="checkbox"/> Diverted <input type="checkbox"/> Conveyed <input type="checkbox"/> Used	_____

List all counties and cities where water is proposed to be diverted, conveyed, and/or used or developed:

Marion County

B. Description of Proposed Use

Type of application to be filed with the Water Resources Department:

- Permit to Use or Store Water
 Water Right Transfer
 Permit Amendment or Ground Water Registration Modification
 Limited Water Use License
 Allocation of Conserved Water
 Exchange of Water

Source of water: Reservoir/Pond Ground Water Surface Water (name) _____

Estimated quantity of water needed: 1.78 cubic feet per second gallons per minute acre-feet

Intended use of water: Irrigation Commercial Industrial Domestic for _____ household(s)
 Municipal Quasi-Municipal Instream Other _____

Briefly describe:

This Land Use Information Form is to accompany a water right transfer application that proposes to add two wells to existing water right Certificate 96789.



Note to applicant: If the Land Use Information Form cannot be completed while you wait, please have a local government representative sign the receipt at the bottom of the next page and include it with the application filed with the Water Resources Department.

See bottom of Page 3. →

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For Local Government Use Only

The following section must be completed by a planning official from each county and city listed unless the project will be located entirely within the city limits. In that case, only the city planning agency must complete this form. This deals only with the local land-use plan. Do not include approval for activities such as building or grading permits.

Please check the appropriate box below and provide the requested information

- Land uses to be served by the proposed water uses (including proposed construction) are allowed outright or are not regulated by your comprehensive plan. Cite applicable ordinance section(s): Marion County Code 17.136.020 (A)
- Land uses to be served by the proposed water uses (including proposed construction) involve discretionary land-use approvals as listed in the table below. (Please attach documentation of applicable land-use approvals which have already been obtained. Record of Action/land-use decision and accompanying findings are sufficient.) **If approvals have been obtained but all appeal periods have not ended, check "Being pursued."**

Type of Land-Use Approval Needed (e.g., plan amendments, rezones, conditional-use permits, etc.)	Cite Most Significant, Applicable Plan Policies & Ordinance Section References	Land-Use Approval:	
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued
		<input type="checkbox"/> Obtained <input type="checkbox"/> Denied	<input type="checkbox"/> Being Pursued <input type="checkbox"/> Not Being Pursued

Local governments are invited to express special land-use concerns or make recommendations to the Water Resources Department regarding this proposed use of water below, or on a separate sheet.

Name: Nicole Inman Title: Associate Planner

Signature: *Nicole Inman* Phone: 503-588-5038 Date: 3/13/2023

Government Entity: Marion County Planning

Note to local government representative: Please complete this form or sign the receipt below and return it to the applicant. If you sign the receipt, you will have 30 days from the Water Resources Department's notice date to return the completed Land Use Information Form or WRD may presume the land use associated with the proposed use of water is compatible with local comprehensive plans.



Receipt for Request for Land Use Information

Applicant name: _____

City or County: _____ Staff contact: _____

Signature: _____ Phone: _____ Date: _____

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JAN 29 1964

MAR 10 65

4/2W 4 91

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

State Well No. _____
State Permit No. _____

(1) OWNER:

Name Michael Hopper
Address Rt. 1 Aurora, Oregon

(2) LOCATION OF WELL:

County Marion Driller's well number _____
Bearing and distance from section or subdivision corner
937' N and 265' E of the SW Corner of S.E. corner of section 4

(3) TYPE OF WORK (check):

New Well Deepening Reconditioning Abandon
Comment, 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
16 " Diam. from 0 ft. to 19 ft. Gage .250
10 " Diam. from 0 ft. to 182 ft. Gage .250

(7) PERFORATIONS:

Perforated? Yes No
Type of perforator used torch
Size of perforations 5/16 in. by 8 in.
185 perforations from 47 ft. to 65 1/2 ft.
190 perforations from 85-3" ft. to 104'-9" ft.
180 perforations from 123'-8" ft. to 143'-9" ft.
0 perforations from 163'3" ft. to 177' ft.

(8) SCREENS:

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

(9) CONSTRUCTION:

Well seal—Material used in seal concrete
Depth of seal 19 ft. Was a packer used? _____
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: 3/8" - 3/4"
Gravel placed from 19 ft. to 182 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 25 ft. below land surface Date 1-4-64
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?
Yield: 600 gal./min. with 30 ft. drawdown after 2 hrs.
" 600 " 51 " 4 "
" 600 " 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 20"
Depth drilled 205 ft. Depth of completed well 178 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
Top Soil	0	3
Light Brown Clay	3	26
Brown Clay Hard	26	39
Dark Brown Clay	39	54
Fine Black Sand	54	61
Brown Clay with Layers of Sand	61	83
Hard Brown Clay	83	89
Blue Clay	89	101
Brown Clay	101	112
Blue Clay	112	123
Black Sand	123	132
Wood	132	133
Brown Clay	133	136
Hard Brown Clay turning to	136	
Blue at		143
To Green at		150
To Blue at	165	166
Black Sand	166	174
Chalk White Clay	174	180
Light Brown Clay	180	205

We installed a concrete plug at 178'

Work started 12-14 19 63 Completed 1-6 19 64
Date well drilling machine moved off of well 1-6 19 64

(13) PUMP:

Manufacturer's Name _____ Type: _____ H.P. _____
Water Well Contractor's Certification: MAR 17
This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief. OWR
NAME Milo Schneider Equipment Co.
(Person, firm or corporation) (Type or print)
Address Star Rt., Box 97, St. Paul, Oregon
Drilling Machine Operator's License No. 212
[Signed] Milo Schneider
(Water Well Contractor)
Contractor's License No. 387 Date 1-25, 19 64

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

APR 25 1997

WELL I.D.# 102416

WATER RESOURCES DEPT.

(START CARD) # 78623

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

(1) OWNER: Well Number _____

Name Ernst Nursery & Farms
Address 20863 Riverside Dr. NE
City St. Paul State OR Zip 97137

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

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

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

(5) BORE HOLE CONSTRUCTION:
Special Construction approval Yes No Depth of Completed Well 347 ft.
Explosives used Yes No Type _____ Amount _____

HOLE			SEAL			Sacks or pounds
Diameter	From	To	Material	From	To	
20"	0	40'	holeplug	0	40	40 sacks
			bentonite			
16"	40	347				

How was seal placed: Method A B C D E
 Other OAR 690-210-340
Backfill placed from _____ ft. to _____ ft. Material _____
Gravel placed from _____ ft. to _____ ft. Size of gravel _____

(6) CASING/LINER:

Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing: 16"	+2'	298	.375	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Liner:				<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) 298'

(7) PERFORATIONS/SCREENS:

Perforations Method _____
 Screens Type _____ Material stainless

From	To	Slot size	Number	Diameter	Tele/pipe size	Casing	Liner
+3	299'			12"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
299	319	.070		12"	screen	<input type="checkbox"/>	<input type="checkbox"/>
319	339	.080		12"	screen	<input type="checkbox"/>	<input type="checkbox"/>
339	347'			12"	pipe	<input checked="" type="checkbox"/>	<input type="checkbox"/>
347	Bottom plate & lift bail						

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

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian	Time
800	138		<input type="checkbox"/>	6x hr. S

Temperature of water 54 Depth Artesian Flow Found _____
Was a water analysis done? Yes By whom _____
Did any strata contain water not suitable for intended use? Too little
 Salty Muddy Odor Colored Other _____
Depth of strata: _____

(9) LOCATION OF WELL by legal description:
County Marion Latitude _____ Longitude _____
Township 4 S N or S Range 2W E or W. WM. _____
Section 4 SW 1/4 NE 1/4
Tax Lot 0110 Lot _____ Block _____ Subdivision _____
Street Address of Well (or nearest address) 6177 Gearin Rd.
St. Paul, OR 97137

(10) STATIC WATER LEVEL:
62' ft. below land surface. Date 4/17/97
Artesian pressure _____ lb. per square inch. Date _____

(11) WATER BEARING ZONES:
Depth at which water was first found 20'

From	To	Estimated Flow Rate	SWL
20	32	20 gpm	8'
297'	341'	800 gpm	62'

(12) WELL LOG:
Ground Elevation _____

Material	From	To	SWL
Topsoil	0	1	
Clay brown	1	36	
Clay gray brown	36	46	
Clay silty gray	46	75	
Sand-silt	75	87	
Clay gray	87	115	
Sand & clay gray	115	126	
Clay gray	126	144	
Clay with sand & gravel	144	175	
Clay gray	175	212	
Clay w/sand	212	224	
Clay gray, part sticky	224	276	
Clay w/sand, gravel gray	276	281	
Clay sandy, brown-gray	281	292	
Clay silty brown	292	297	
Sand brown	297	304	62'
Sand black	304	315	62'
Gravel & sand, black	315	341	62'
Clay gray	341	347	

Date started 12/24/96 Completed 4/17/97

(unbonded) Water Well Constructor Certification:
I certify that the work I performed on the construction, 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.

Signed Kermit Martin WWC Number 1391
Date 4/23/97

(bonded) Water Well Constructor Certification:
I accept responsibility for the construction, 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.

Signed Ivan Gossen WWC Number 783
Date 4/21/97

ORIGINAL & FIRST COPY-WATER RESOURCES DEPARTMENT SECOND COPY-CONSTRUCTOR THIRD COPY-CUSTOMER

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MARI 68592

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

WELL I.D. LABEL# L 132853
START CARD # 215109
ORIGINAL LOG #

(1) LAND OWNER Owner Well I.D.
First Name Bruce Last Name Ernst
Company Ernst Nursery & Farms
Address PO Box 460
City St. Paul State OR Zip 97137

(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 Thr
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 95 ft.
BORE HOLE SEAL sacks/ lbs
Dia From To Material From To Amt lbs
16 0 34 Bentonite Chips 0 34 34 S
12 34 95 Calculated 26
Calculated

How was seal placed: Method [] A [] B [] C [] D [] E
[X] Other 690-210-0340
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 Pounds Actual Amount Pounds

(6) CASING/LINER
Casing Liner Dia + From To Gauge Stl Plstc Wld Thr
12 [X] 1.5 58.14 .25 [X] [X] [X] []
10 [X] 2.96 95 .25 [X] [X] [X] []
Shoe [] Inside [X] Outside [] Other Location of shoe(s) 58.14
Temp casing [] Yes Dia From To

(7) PERFORATIONS/SCREENS
Perforations Method
Screens Type V-wire Material stainless steel
Perf/S Casing/ Screen Scrn/slot Slot # of Tele/
reen Liner Dia From To width length slots pipe size
Screen 10 69.75 90 .08 10

(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)
200 48.5 4
Temperature 53 °F Lab analysis [] Yes By
Water quality concerns? [] Yes (describe below) TDS amount 87
From To Description Amount Units

(9) LOCATION OF WELL (legal description)
County MARION Twp 4 S N/S Range 2 W E/W WM
Sec 4 SW 1/4 of the SE 1/4 Tax Lot 1100
Tax Map Number Lot
Lat " or DMS or DD
Long " or DMS or DD
[] Street address of well [] Nearest address
6180 Gearin Road NE, St. Paul, OR 97137

(10) STATIC WATER LEVEL
Date SWL(psi) + SWL(ft)
Existing Well / Pre-Alteration
Completed Well 03-21-2019
Flowing Artesian? [] Dry Hole? []
WATER BEARING ZONES Depth water was first found 76
SWL Date From To Est Flow SWL(psi) + SWL(ft)
09-28-2018 76 90 21

(11) WELL LOG
Ground Elevation
Material From To
Clay, brown 0 5
Silt, brown 5 19
Silt, greenish gray 19 32
Clay, greenish gray, sand 32 38
Clay, greenish gray 38 42
Clay, gray 42 52
Sand, black, silt, dark gray 52 76
Sand, black, silt, layers, dark gray 76 90
Clay, dark greenish gray 90 93
Clay, blueish gray 93 95
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JUN 26 2019
OWRD
Date Started 09-28-2018 Completed 03-19-2019

(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 04-12-2019
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 04-12-2019
Signed [Signature]
Contact Info (optional)

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.

RECEIVED
RECEIVED
 DEC 24 1965
 STATE ENGINEER
 STATE OF OREGON
 (Please type or print)
 JAN 3 1966
 STATE ENGINEER

G 3485

MAR 11 1966

4/2w-9A

State Well No. _____
 State Permit No. _____

(1) OWNER: SALEM OREGON
 Name Amiel Desmet
 Address Rt. 1, Box 110
Aurora, Oregon

(2) LOCATION OF WELL:
 County Marion Driller's well number _____
1/4 Section 9 T. 4S R. 2W W.M. _____
 Bearing and distance from section or subdivision corner _____

(3) TYPE OF WORK (check):
 New Well Deepening Reconditioning Abandon
 Indonment, 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
18" Diam. from 0 ft. to 39 ft. Gage 250
12" Diam. from 0 ft. to 113 ft. Gage _____
 _____" Diam. from _____ ft. to _____ ft. Gage _____

(7) PERFORATIONS: Perforated? Yes No
 Type of perforator used torch
 Size of perforations 3/8 in. by 8 in.
360 perforations from 82 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 _____ Model No. _____
 Slot size _____ Set from _____ ft. to _____ ft.
 Diam. Slot size _____ Set from _____ ft. to _____ ft.

(9) CONSTRUCTION:
 Well seal—Material used in seal Bentonite
 Depth of seal 39' ft. Was a packer used? yes
 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: 3/8 - 3/4
 Gravel placed from 0 ft. to 112 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 9 ft. below land surface Date _____
 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?
 Yield: 500 gal./min. with 38 ft. drawdown after 6 hrs.
 " with air lift " "
 " " " "
 Bailer test gal./min. with _____ ft. drawdown after _____ hrs.
 Artesian flow g.p.m. Date _____
 Temperature of water 54 Was a chemical analysis made? Yes No

(12) WELL LOG: Diameter of well below casing 0
 Depth drilled 113 ft. Depth of completed well 113 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
Blue clay	5	39 1/2
Blue sand	39 1/2	65
Blue clay	65	74
Blue sand small layer clay	74	112
Clay	112	113

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Work started 5-17-65 19 ____ Completed 6-25 1965
 Date well drilling machine moved off of well _____ 19 ____

(13) PUMP:
 Manufacturer's Name none
 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 Milo Schneider
 (Person, firm or corporation) (Type or print)
 Address Star Rt., Box 97, St. Paul, Oregon
 Drilling Machine Operator's License No. 212
 [Signed] Milo Schneider
 (Water Well Contractor)
 Contractor's License No. 387 Date 12-15-65, 19 ____