# Application for Permit Amendment

O R E G O N
WATER RESOURCES
DEPARTMENT

Oregon Water Resources Department 725 Summer Street NE, Suite A Salem. Oregon 97301-1266

## Part 1 of 5 – Minimum Requirements Checklist

This permit amendment application will be returned if Parts 1 through 5 and all required attachments are not completed and included.

For questions, please call (503) 986-0900, and ask for Transfer Section.

Mark Africa Africa	1 through 5 and	
ESOURCES T M E N T	www.oregon.gov/OWRD	
	(503) 986-0900	
	Salem, Oregon 9/301-1266	

		For questions, please can (505) 980-0900, and ask for Transfer Section.	RECEIVED
	Check	all items included with this application. (N/A = Not Applicable)	AUG 18 2023
$\boxtimes$		Part 1 – Completed Minimum Requirements Checklist.	AUG 1 8 2023
$\boxtimes$		Part 2 – Completed Application Map Checklist.	OWRD
$\boxtimes$		Part 3 – Application Fee, payable by check to the Oregon Water Resources Department completed Fee Worksheet, page 3. Try the new online fee calculator at: <a href="http://apps.wrd.state.or.us/apps/misc/wrd">http://apps.wrd.state.or.us/apps/misc/wrd</a> fee calculator.	ent, and
$\boxtimes$		Part 4 – Completed Applicant Information and Signature.	
$\boxtimes$		Part 5 – Information about Permits to be Amended: <b>Number of permits to be amen List the Permits here:</b> Permit G-18834	ded: <u>1</u>
$\boxtimes$		Please include a separate Part 5 for each permit. (See instructions on page 6)  Completed Permit Amendment Application Map (Does not have to be prepared by a	Cartified
		Water Right Examiner).	recrimed
	⊠ N/A	Request for Assignment Form and statutory fee. The request for assignment form he completed if the applicant is <b>not</b> the permit holder of record and needs to be assign permit; <b>or</b> the landowner of the proposed place of use is <b>not</b> the permit holder of reneeds to be assigned to the permit (the Request for Assignment Form is available or <a href="https://www.oregon.gov/OWRD/Forms/Pages/default.aspx">https://www.oregon.gov/OWRD/Forms/Pages/default.aspx</a> ). Assignment is not nee applicant is the permit holder of record.	ed to the cord and nline at
	⊠ N/A	Affidavit(s) of Consent are required from all permit holder(s) of record if the permit to the applicant <b>or</b> other permit holders of record that are not listed as applicants.	is not assigned
	□ N/A	Oregon Water Resources Department's Land Use Information Form with approval are (or signed land use form receipt stub) from each local land use authority in which we diverted, conveyed, and/or used. Not required if water is to be diverted, conveyed, anly on federal lands or if all of the following apply: a) a change in place of use only, structural changes, c) the use of water is for irrigation only, and d) the use is located irrigation district or an exclusive farm use zone.	ater is to be and/or used b) no
$\boxtimes$	□ N/A	Water Well Report/Well Log for changes in point(s) of appropriation (well(s)) or add point(s) of appropriation.	itional
	⊠ N/A	A Geologist Report for a change from a surface water point of diversion to a ground w appropriation (well), if the proposed well is more than 500 feet from the surface wa more than 1000 feet upstream or downstream from the point of diversion. (ORS 540	ter source and
		(For Staff Use Only)	
		WE ARE RETURNING YOUR APPLICATION FOR THE FOLLOWING REASON(S):  Application fee not enclosed/insufficient	
		Staff:	

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

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

		Certified Water Right Examiner. Check all boxes that apply.	RECEIVED
	⊠ N/A	If more than three permits are involved, separate maps for each permit.	AUG 18 2023
$\boxtimes$		Permanent quality printed with dark ink on good quality paper.	OWRD
$\boxtimes$		The size of the map can be $8\% \times 11$ inches, $8\% \times 14$ inches, $11 \times 17$ inches, or up to inches. For $30 \times 30$ inch maps, one extra copy is required.	
$\boxtimes$		A north arrow, a legend, and scale.	
$\boxtimes$		The scale of the map must be: $1$ inch = $400$ feet, $1$ inch = $1,320$ feet, the scale of the assessor map if the scale is not smaller than $1$ inch = $1,320$ feet, or a scale that has approved by the Department.	
$\boxtimes$		Township, Range, Section, $\frac{1}{4}$ , DLC, Government Lot, and other recognized public survey lines.	land
$\boxtimes$		Tax lot boundaries (property lines) are required. Tax lot numbers are recommended	ed.
$\boxtimes$		Major physical features including rivers and creeks showing direction of flow, lakes reservoirs, roads, and railroads.	and
$\boxtimes$		Major water delivery system features from the point(s) of diversion/appropriation main pipelines, canals, and ditches.	such as
		Existing place of use that includes separate hachuring for each water use permit, p date, and use including number of acres in each quarter-quarter section, government in each quarter-quarter section as projected within government lots, donation land other recognized public land survey subdivisions. If less than the entirety of the pe being changed, a separate hachuring is needed for the portion of the permit left under the permit left	ent lot, or d claims, or rmit is
	⊠ N/A	If you are proposing a change in place of use, show the proposed place of use with hachuring that includes separate hachuring for each permit, priority date, and use number of acres in each quarter-quarter section, government lot, or in each quarter section as projected within government lots, donation land claims, or other recognitudes are public land survey subdivisions.	including er-quarter
$\boxtimes$		Existing point(s) of diversion or well(s) with distance and bearing or coordinates from recognized survey corner. This information can be found in your water use permit.	
	□ N/A	If you are proposing a change in point(s) of diversion or well(s), show the proposed location and label it clearly with distance and bearing or coordinates. If GPS coordinate used, latitude-longitude coordinates may be expressed as either degrees-minuseconds with at least one digit after the decimal (example $-42^{\circ}32'15.5''$ ) or degree with five or more digits after the decimal (example $-42.53764^{\circ}$ ).	nates tes-

	FEE WORKSHEET for PERMIT AMENDMENT		
1	Base Fee (includes one type of change to one permit for up to 1 cfs)	1	\$1,360
	Types of change proposed:		
	☐ Place of Use ☐ Point of Diversion/Appropriation		
	Number of above boxes checked = $\frac{1(2a)}{}$		
	Subtract 1 from the number in line $2a = 0 (2b)$ If only one change, this will be 0		
2	Multiply line 2b by \$1090 and enter » » » » » » » » » » » » » » » » » » »	2	\$0
	Number of permits included in Permit Amendment <u>1 (3a)</u>		
_	Subtract 1 from the number in 3a: <u>0 (3b)</u> If only one permit this will be 0	_	60
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?		
	☐ No: enter 0 ☐ Yes: enter \$480 for the 1 <sup>st</sup> well to be added or changed <u>\$480 (4a)</u>		
	Do you propose to add or change additional wells?		
	☐ No: enter 0 ☐ Yes: multiply the number of additional wells by \$410 <u>\$410 (4b)</u>		
4	Add line 4a to line 4b and enter » » » » » » » » » » » » » » » » » » »	4	\$890
	Do you propose to change the place of use?		
	No: enter 0 on line 5		
	Yes: enter the cfs for the portions of the permits to be amended (see below*): (5a)		
	Subtract 1.0 from the number in 5a above: (5b)		
	If 5b is 0, enter 0 on line 5 » » » » » » » » » » » » » » » »		
_	If 5b is greater than 0, round up to the nearest whole number: (5c) and multiply 5c	5	\$0
5 6	by \$350, then enter on line 5 » » » » » » » » » » » » » » » » » »	6	\$2,250
0	Is this permit amendment:	U	72,230
	necessary to complete a project funded by the Oregon Watershed Enhancement Board		
	(OWEB) under ORS 541.932?		
	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 " " " " " " " " " " " " " " " " Permit Amendment Fee:	Q	\$2.250

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

## Part 4 of 5 – Applicant Information and Signature

#### **Applicant Information**

APPLICANT/BUSINESS NAME		PHONE N	0.	ADDITIONAL CONTACT NO.				
Brendon and Heather Schloe		(503) 9	70-5598, (503) 970-7655					
ADDRESS				FAX NO.				
1287 N Fir St								
CITY	STATE	ZIP	E-MAIL					
Canby	OR	97013	97013 hschloe@dahlias.com					
BY PROVIDING AN E-MAIL ADD	RESS, CONSENT IS G	IVEN TO R	ECEIVE ALL CORRESPONDENCE FROM	M THE DEPARTMENT				
ELECTRONICALLY. COPIES OF T	HE FINAL ORDER DO	CUMENTS	WILL ALSO BE MAILED.					

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

AGENT/BUSINESS NAME			PHONE NO.	ADDITIONAL CONTACT NO.
Doann Hamilton / Pacific Hydro-	Geology, In	(503) 632-5016	(503) 632-5983 (Cell)	
ADDRESS			FAX NO.	
18487 S. Valley Vista Road				(503) 632-5983
CITY	STATE	ZIP	E-MAIL	
Mulino	OR	97042	phgdmh@gmail.com	
By providing an e-mail addres	s, consent	IS GIVEN TO RECEIVE	ALL CORRESPONDENCE FR	OM THE DEPARTMENT
ELECTRONICALLY. COPIES OF THE F	INAL ORDE	R DOCUMENTS WILL A	LSO BE MAILED.	

Explain in your own words what you propose to accomplish with this permit amendment; and why:

We recently received the Final Order for our first permit amendment, T-13985, and drilled Well 2.

Unfortunately the well was dry, so we need to apply for another permit amendment for a new well location.

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

Check this box if this project is fully or partially funded by the American Recovery and Reinvestment Act. (Federal
stimulus dollars)

Is the applicant the permit holder of record? Xes No

If NO, include either:

A completed assignment form (with required statutory assignment fee), assigning all or a portion of the permit
to the applicant(s), <b>OR</b>

An affidavit of consent from the permit holder(s) of record that gives permission for the applicant to amend the permit.

If YES, this application will not be accepted by the Department.

If NO, what are the completion dates of the permit(s)? October 1, 2025

- If the permit completion date expires while the Permit Amendment Application is pending, the Department will not approve the Permit Amendment Application until an Extension of Time Application is approved for the permit.
- You may consider using the Reimbursement Authority process to expedite the processing of this Permit Amendment Application if the completion date of the permit expires within 6 months of the date of filing this application.

#### By my signature below, I confirm that I understand:

• Prior to Department approval of the permit amendment, I may be required to submit payment to the Department for publication of a notice in a newspaper with general circulation in the area where the permit is located, once per week for two consecutive weeks. If more than one qualifying newspaper is available, I suggest publishing the notice in the following newspaper: Canby Herald

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Applicant Signature  Applicant Signature  Applicant Signature	Print Name (and Title if applicable)  Print Name (and Title if applicable)  Print Name (and Title if applicable)	hloe 8/3/2023  Date 8/3/2023								
Check <u>one</u> of the following:										
∑ The applicant is respons continue to be sent to the continue to the sent to the continue to the con	sible for completion of change(s). Ne applicant.	Notices and correspondence sho								
The permit holder(s) of record will be responsible for completing the proposed change(s) af the final order is issued. Copies of notices and correspondence should be sent to the permit holder(s) of record										
holder(s) of record.  Check the appropriate box, if a	applicable:									
Check the appropriate box, if a	ermits proposed for amendment a	are or will be located within or s								
Check the appropriate box, if a  Check here if any of the p by an irrigation or other w  IRRIGATION DISTRICT NAME NA	ermits proposed for amendment avater district.  ADDRESS									
Check the appropriate box, if a  Check here if any of the p by an irrigation or other w  IRRIGATION DISTRICT NAME	ermits proposed for amendment a	are or will be located within or s								
Check the appropriate box, if a  Check here if any of the post an irrigation or other water in the post and irriga	ermits proposed for amendment avater district.  ADDRESS	zip water service agreement or oth								
Check the appropriate box, if a  Check here if any of the post an irrigation or other water in the post and irriga	ermits proposed for amendment avater district.  ADDRESS  STATE  ny of the permits supplied under a	zip water service agreement or oth								
Check the appropriate box, if a  Check here if any of the p by an irrigation or other w  IRRIGATION DISTRICT NAME  NA  CITY  Check here if water for an contract for stored water	ermits proposed for amendment avater district.  ADDRESS  STATE  ny of the permits supplied under a with a federal agency or other ent	zip water service agreement or oth								

ENTITY NAME	ADDRESS							
Clackamas Co. Department of Transportation and	150 Beavercreek Road							
Development, Planning Division								
CITY	STATE	ZIP						
Oregon City	Oregon	97045						

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If POA, OWRD

Well Log ID#

(or Well ID

Is this POD/POA

Authorized by the

permit or is it

POD/POA

Name or

Number

### Part 5 of 5 – Water Use Permit Information

Tax Lot,

DLC or

Gov't Lot

Measured Distances

(from a recognized

survey corner)

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

#### PERMIT # G-18834

Rng

Sec

1/4 1/4

## Table 1. Location of Authorized and Proposed Point(s) of Diversion (POD) or Appropriation (POA)

(Note: If the POD/POA name is not specified in the permit, assign it a name or number here.)

Twp

Ivamber	Proposed?	Tag # L)								GOVILOL	survey corner)		
Well 1	Authorized Proposed	CLAC 9477	3	S	1	E	21	SE	sw	TL 1600	490 feet north and 1,790 feet east from the SW corner, Section 21.		
Well 2	Authorized Proposed	START CARD 1070369	3	S	1	E	21	SE	sw	TL 1600	635 feet north and 1,460 feet east from the SW corner, Section 21.		
Well 3	Authorized Proposed	NA	3	S	1	E	21	SE	sw	TL 1600	30 feet north and 1,400 feet east from the SW corner, Section 21.		
Well 4	☐ Authorized ☐ Proposed	NA	3	S	1	E	21	SE	sw	TL 1600	40 feet north and 1,965 feet east from the SW corner, Section 21.		
Checl	Check all type(s) of change(s) proposed below (change "CODES" are provided in parentheses):												
	☐ Place of Use (POU) ☐ Point of Appropriation/Well (POA)												
	Point of Diver	sion (POD)				$\boxtimes$	Addi	tional	l Poin	t of Appro	priation (APOA)		
	Additional Po	int of Diversio	n (AP	OD)				ace wa /GW)	ater P	OD to Gro	ound Water POA		
Will a	all of the propose	d changes affe	ct th	ie en	tire	wate	r use p	ermi	t?				
	_	te only the pro " listed above				,				2 on the n	ext page. Use the		
	No Complet	te all of Table	2 to d	descr	ibe t	he po	ortion	of the	e pern	nit to be o	hanged.		
For a chang	ge in place of use	:											
Does the p  ☑ Yes □	e <mark>rmit holder of re</mark> No	ecord own or o	contr	ol th	e lar	nd TC	) whic	h the	place	of use is	being moved?		
as a pern	e landowner of the nit holder of reco r fee for an assigni	<b>rd</b> by submitti		•				_			signed to the permit and the required		
Is the prop	osed place of use	contiguous to	the	auth	noriz	ed pl	ace of	use?	⊠ Ye	s 🗌 No			
• ,											norized place of use tion efforts undertaken		

496.192 or the federal Endangered Species Act of 1973 (16 U.S.C. 1531 to 1544), as determined by the

for the purposes of benefiting a species listed as sensitive, threatened, or endangered under ORS 496.171 to

listing agency. Contiguous land being either adjacent land or land separated from the land to which a permit is authorized by roads, utility corridors, irrigation ditches or publicly owned rights of way.

AUG 18 2023 OWRD Please use and attach additional pages of Table 2 as needed. See page 6 for instructions.

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

#### Table 2. Description of Changes to Water Use Permit # <u>G-18834</u>

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			
Twp	Rng	Sec	<i>y</i> <sub>4</sub> <i>y</i> <sub>4</sub>	. Tax	ıx Lot I		Acres (if applicable)	POD(s) or POA(s) (name or number from Table 1)	Priority Date	Changes (see "CODES" from previous page)	TV	wp	Rr	ng	Sec	1/4	1/4	Tax Lot		(it	POD(s) or POA(s) to be used (from Table 1)	Priority Date
								,		APOA	3	S	1	Е	21	SE	sw	1600	NA	9.7	Wells 1, 2, 3 and 4	11-19-2014
				TOTAL	ACRI	ES											Т.	OTAL AC	CRES	9.7		

Additional	remarks:	None.

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Revised 7/1/2021

Permit Amendment Application – Page 8 of 9  $\,$ 

TACS

Are there other water rights certificates, water use permits or ground water registrations associated with the "from" or "to" lands? 

Yes 
No

If YES, list the other certificate, permit, or ground water registration numbers: **CERTIFICATE 90766** 

If the permit(s) are for irrigation or supplemental irrigation use, other water rights existing on the same land for irrigation that are subject to transfer must either change concurrently or be cancelled. Any change to a water right certificate or ground water registration must be filed separately in a water right transfer application or ground water registration modification application, respectively.

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

Well log(s) are attached for each authorized and proposed well(s) that are clearly labeled and associated with the corresponding well(s) in Table 1 above and on the accompanying application map. (**Tip**: You may search for well logs on the Department's web page at: <a href="http://apps.wrd.state.or.us/apps/gw/well">http://apps.wrd.state.or.us/apps/gw/well</a> 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	CLAC 9477		See Well Log CLAC 9477						
Well 2	Started	START CARD 1070369	300	8 inch	0 to 300	0 to 20	TBD	NA	Alluvial	ALL WELLS NOT LESS THAN FULL
Well 3	No	NA	500	8 inch	0 to 500	0 to 20	TBD	NA	Alluvial	RATE OF PERMIT
Well 4	No	NA	500	8 inch	0 to 500	0 to 20	TBD	NA	Alluvial	FLRIVIII

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# Land Use Information Form

OWRD



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

Applicant(s):	Brendor	n and	Heather	Schl	oe
, ,					

Mailing Address: 1287 N Fir St.

City: Canby

State: OR

Zip Code: <u>97013</u>

Daytime Phone: (503) 970-5598

#### 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	% %	Tax Lot #	Plan Designation (e.g., Rural Residential/RR-5)		Water to be:		Proposed Land Use:
<u>3S</u>	<u>1E</u>	21		1600	<u>EFU</u>	☑ Diverted	□ Conveyed	□ Used	<u>IR</u>
						Diverted	Conveyed	Used	
						Diverted	☐ Conveyed	Used	
		1				Diverted	☐ Conveyed	Used	

		-	<u></u>			,,,,	
List all counties and ci	ties where	water is pro	oposed to be	diverted, conveyed, ar	nd/or used or develop	ed:	
Clackamas Count	у						
B. Description of Pro	oposed U	se					
Type of application to Permit to Use or St	be filed w tore Water	ith the Water	er Resources r Right Transfe ction of Conser	r 🔀 Permi	it Amendment or Groun	d Water Registra	ation Modification
Source of water: R	eservoir/Po	ond 🛛 G	Ground Water	Surface Water (	name)		
Estimated quantity of	water nee	eded: <u>0.12</u>	⊠ cut	pic feet per second	gallons per minute	acre-feet	
Intended use of water		ation [	Commercial Quasi-Munic	☐ Industrial ipal ☐ Instream	Domestic forOther	househo	ald(s)
Briefly describe:							
This Land Use Info	ormation	n Form is t	o accompa	ny a permit amend	ment application	that propos	es two
additional points	of appro	priation (	wells) for e	xisting water right	Permit G-18834.		
		**********			************************		200
Note to applicant: If t	he Land U	se Informati	on Form can		e you wait, please hav		

See bottom of Page 3. →

Department.

# For Local Government Use Only

OWRD

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 ar	nd provide the requested information		
Land uses to be served by the proposed water by your comprehensive plan. Cite applicable	er uses (including proposed construction) are ordinance section(s):	Section	ht or are not regulated 461 (EFU)
☐ Land uses to be served by the proposed water as listed in the table below. (Please attach do Record of Action/land-use decision and according periods have not ended, check "Being pursus the content of the content	ocumentation of applicable land-use approva mpanying findings are sufficient.) <b>If approva</b>	ils which have a	Iready been obtained.
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	d-Use Approval:
permits, etc.,		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		Obtained Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
		☐ Obtained ☐ Denied	☐ Being Pursued ☐ Not Being Pursued
Name: Alos Rodriguez	Title:_	Plank	rer/
Signature: Cackamas Covernment Entity: Clackamas	Phone: 833 772	454/Date: _	Q.IC 2023
Note to local government representative: Pleasign the receipt, you will have 30 days from the Information Form or WRD may presume the lar comprehensive plans.	ase complete this form or sign the receipt be Water Resources Department's notice date	to return the co	ompleted Land Use
Receip	t for Request for Land Use Informati	<u>on</u>	
Applicant name:			
City or County:	Staff contact:		
Signature:	Phone: Date	e:	

**CLAC 9477** NOTICE TO WATER WELL CONTRACTOR The original and first copyi of this report are to be filed with the JUL 2 2 1966 WATER WELL REPORT 9477 Slate Well No. STATE ENGINEER, SALEM, OREGON 17510 ENGINEESTATE OF OREGON within 30 days from the date ALEM OREGON (Please type or print) of well completion. (1) OWNER: (11) WELL TESTS: Drawdown is amount water level is lowered below static level CARRIGG, John Name Was a pump test made? Yes No If yes, by whom? 200 N. W. Virginia Address gal./min. with ft. drawdown after hrs Canby, Oregon (2) LOCATION OF WELL: County Clackamas Driller's well number /966 - 22 Bailer test 30 gal./min, with 35 ft. drawdown after hrs. Artesian flow 14 Section 352/ T. 3S R. Temperature of water Bearing and distance from section or subdivision corner Was a chemical analysis made? 

Yes (12) WELL LOG: Lot 6 of Olivers' Addition Diameter of well below casing ... Depth drilled /2/5 ft. Depth of completed well 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 (3) TYPE OF WORK (check): Well Deepening [ Reconditioning [ Abandon [ .Jandonment, describe material and procedure in Item 12. (4) PROPOSED USE (check): (5) TYPE OF WELL: Driven 🗆 Domestic Industrial | Municipal | Rotary K Irrigation [ Test Well [ Other Cable Jetted [ Dug Bored [ (6) CASING INSTALLED: Threaded | Welded | .." Diam. from ..... ft. to ..... ft. 1413 " Diam. from ...... ft. to ..... ft. Gage . (7) PERFORATIONS: Perforated? [] Yes Type of perforator used Size of perforations in, by perforations from ...... ft. to ...... .... perforations from ..... ft. to ... perforations from ...... ft. to ..... perforations from ...... ft, to .... AUG 1 8 2023 perforations from ..... ft. to ..... (8) SCREENS: Well screen installed? | Yes No Diem. ..... Slot size ...... Set from ..... ft. to ..... 66 Completed Work started 19 Diam. ..... Slot size ...... Set from ..... ft. to ..... Date well drilling machine moved off of well 304 (9) CONSTRUCTION: (13) PUMP: Well seal-Material used in seal Banks Depth of seal 20 ft. Was a packer used? Diameter of well bore to bottom of seal \_\_\_\_\_\_in. Water Well Contractor's Certification: Were any loose strata cemented off? 🗌 Yes 💆 No - Depth Was a drive shoe used? Yes No This well was drilled under my jurisdiction and this report is Was well gravel packed? | Yes | No true to the best of my knowledge and belief. Size of gravel: Gravel placed from ..... ft. to ..... NAME SKYLES DRILLING & SUPPLY Did any strata contain unusable water? 

Yes (Person, firm or corporation) (Type or print) Address GLADSTONE, OREGON Type of water? depth of strata Method of sealing strata off Drilling Machine Operator's License No.

(USE ADDITIONAL SHEETS IF NECESSARY)

Contractor's License No

ft. below land surface Date July

lbs. per square inch Date

(10) WATER LEVELS:

Static level

Artesian pressure

### **CLAC 9477**



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

www. oregon.gov/owrd

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AUG 1 8 2023

# Application for Well ID Number

OWRD

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OVAND	
Do not complete if the well already has a Well Identificat	ion Number. SEPT 22 2021
I. OWNER INFORMATION John E and Ellee Current Owner Name (please print): Carrigg Trust	
Mailing Address: PO BOX 261	
City, State, Zip: Canby	
	Care Of (C/O)
Name & Address: Kathleen Cutsforth, trus	ee
City, State, Zip: PO BOX 261, Canby, OK	
. ,	
II. WELL LOCATION INFORMATION (Please fill out as comple	tely as possible)
Township: 3 (North / South) Range: 1 (East) West)	Section: 21 SE 1/4 of the SW 1/4
Tax Lot (usually last 3-5 numbers of Tax Map #):1600	
GPS Coordinates: 45, 288 19668; -122.69641	263 DEF WE ADD MAD
GPS Coordinates: 45. 288 19668; -122.6964/ Street Address of Well, City: NW 318+ Ave + N Holly S+	(NE corner)
If the property had a different street address in the past:	
THE CONTROL OF THE CO	tale as results. AND attack come of Wall Papart if quallable
III. GENERAL WELL INFORMATION (Please fill out as comple	
Use of Well (domestic, irrigation, commercial, industrial, monitoring)	141 Ch O : Di + ( "
Date Well Constructed (or property built): 7-8-1966 Total	Well Depth: 17.177 Casing Diameter: 6
Owner at time the well was constructed (if known): John Carr	Well Report # (if known): CLAC 9477
Other Information:   rrigation WR Permit #	G 17492
SUBMITTED BY (please print): Kathe Cutsforth	
PHONE: 503 936 9629 EMAIL &/or FAX:	Johns datter@proton mail. Com
PHONE: 503 430 4021 EMAIL WINTER	Kathe cuts for the @ amail. Com
Send application to: Oregon Water Resources Department 725 Summer	•
or you are welcome to email the completed form to Ladeena.K. Ashley	/@oregon.gov.
For Official Use Only by the Oregon	
	ort Number: Well Identification #: L-144433
9-22-21 <u>CLAC</u>	9477 <u>L-144433</u>

14310

Last Update: 02/22/2021

Well I.D. Number/2

WCC